



# 2025 CPT Code Updates and Impact on UBO Billing

UBO Support Team  
February 2025

# Agenda

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- Changes to Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) Codes
- Effective Dates and Symbols for 2025 CPT® Code Changes
- Proposed Action for Code Changes
- Summary of 2025 CPT® Code Changes
- Evaluation and Management
- Surgery
- Radiology
- Pathology/Laboratory
- Medicine
- Category III
- Proprietary Lab Analysis (PLA)



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# Code Effective Dates

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- American Medical Association (AMA) updates CPT® codes annually, effective 1 January
- Centers for Medicare & Medicaid Services (CMS) updates HCPCS codes on a quarterly basis
- Military Health System (MHS) Coding Guidelines were recently updated in January 2025
- DHA Uniform Business Office (UBO) Outpatient rates for 2025 CPT®/HCPCS codes are generally effective 1 July
  - The DHA UBO Program Office has completed the implementation of code updates with an effective date of 1 January 2025 to MHS GENESIS and all legacy systems
  - **Reminder:** DHA UBO rates cannot be applied retroactively



# Symbols for 2025 CPT® Code Changes

Symbol	Title	Symbol Meaning
•	Bullet symbol	located to the left of CPT® codes that identifies new procedures and services
▲	Triangle symbol	located to the left of CPT® codes that identifies revised/modified code descriptions
+	Plus symbol	located to the left of CPT® codes that identifies add-on codes (also located in Appendix D of CPT®) for procedures that are commonly, but not always, performed at the same time and by the same surgeon as the primary procedure
★	Star symbol	Indicates a telemedicine code
⚡	Flash symbol	Located to the left of CPT® codes that identifies vaccines pending FDA approval but that have been assigned a CPT® code Codes with a <del>strike through</del> are deleted codes Words with a <del>strike through</del> are called " <i>changed codes</i> " and can alter the use of the code Added wording in a revised/modified code is <u>underlined</u> and can also alter the use of the code
🚫	Cancel Sign	Indicates a code that is exempt from the use of modifier 51 but is not designated as a CPT® add-on procedure or service
▶◀	Green text within green arrows	indicates revised guidelines, cross-references, and/or explanatory text
#	Pound sign	indicates a resequenced code
✖	Duplicate PLA Test symbol	indicates a duplicate PLA test
↑↓	Category I PLA symbol	indicates a Category I PLA



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# Proposed Actions for Code Changes

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## Coding Department Supervisors:

- Order 2025 codebooks
- Archive previous year manuals

## Coders:

- Review 2025 CPT® code changes
  - Review all changes to guidelines, rules, and policies
  - Highlight and review all changes in the index and tabular sections that pertain to specialty
  - Review updates in coding tools (e.g., CCE, EncoderPro, CPT® Assistant, Find-A-Code)
  - Seek access to tools from specialty groups (e.g., American College of Obstetrics and Gynecology (ACOG))
- Attend local, regional, and national conferences to stay abreast of changes
- Review American Hospital Association (AHA) Coding Clinic® determinations of updated ICD-10-CM/HCPCS code use
- Follow the MHS Professional Services and Specialty Medical Coding Guidelines for MHS specifics and any exceptions to industry rules (e.g., CMS)
- All current MHS Guidance can be found on the Coding Workgroup MilSuite page
  - <https://www.milsuite.mil/book/community/spaces/dha-pad/coding-work-group>



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# Proposed Actions for Code Changes cont.

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## Clinical Documentation Improvement (CDI) Specialists:

- Create a documentation ‘cheat sheet’ of 2025 updates that impact provider documentation and distribute to providers, coders, and billing personnel
- Provide formal training on new, modified, and deleted codes and the MHS policies impacted
- Review internal audit processes to ensure that 2025 updates are evaluated for accuracy as well as the Coding Compliance Plan, e.g., Review and update internal audit processes and plans to ensure that all documents are consistent with 2025 updates

## Billing Personnel:

- Review new payer policy changes that pertain to the 2024 updates, determine if payer rules apply
- Ensure payer requirements are understood by all billers
- Review updates and changes in online billing software tools
- Review claims prior to submission and query coders on any inconsistent utilization of codes



# Overview of the New, Revised, and Deleted 2025 CPT® Codes



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# Summary of 2025 CPT® Changes\*

Section	Added	Deleted	Revised
Evaluation and Management (E/M)	17	3	0
Surgery	33	13	6
Radiology	6	0	0
Pathology/Lab	13	6	5
Proprietary Laboratory Analysis (PLA) & MAAA	10	3	2
Medicine	5	3	21
Category II	0	0	0
Category III	47	13	1
<b>Totals:</b>	<b>131</b>	<b>43</b>	<b>34</b>

\*Totals do include any codes revised, deleted, or changed in CY24 but which appear for first time in CY2025 CPT® book



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# Updates to Evaluation & Management (E/M)

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**New Codes Added:** A total of 17 new telemedicine codes have been introduced, specifically designed for synchronous (real-time) audio-video and audio-only encounters. These codes are categorized based on patient status (new or established) and the complexity of medical decision-making.

## 2025 E/M CPT Updates Overview

- Refinements to code descriptors for better clarity and consistency.
- Updates to prolonged services and time-based reporting.
- Expanded guidelines for medical decision-making (MDM) documentation.
- Adjustments to align with evolving clinical practices and patient care needs.



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# Evaluation and Management E/M

Symbols	Codes	Code Description
#•	98000	Synchronous audio-video visit for the evaluation and management of a <b>new</b> patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 15 minutes must be met or exceeded.
#+•	98001	Synchronous audio-video visit for the evaluation and management of a <b>new</b> patient, which requires a medically appropriate history and/or examination and low medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
#•	98002	Synchronous audio-video visit for the evaluation and management of a <b>new</b> patient, which requires a medically appropriate history and/or examination and moderate medical decision making. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded



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# Evaluation and Management E/M (1)

Symbols	Codes	Code Description
#•	98003	Synchronous audio-video visit for the evaluation and management of a <b>new patient</b> , which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 15 minutes must be met or exceeded.
#•	98004	Synchronous audio-video visit for the evaluation and management of an <b>established patient</b> , which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 10 minutes must be met or exceeded.
#•	98005	Synchronous audio-video visit for the evaluation and management of an <b>established patient</b> , which requires a medically appropriate history and/or examination and low medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.
#•	98006	Synchronous audio-video visit for the evaluation and management of an <b>established patient</b> , which requires a medically appropriate history and/or examination and moderate medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
#•	98007	Synchronous audio-video visit for the evaluation and management of an <b>established patient</b> , which requires a medically appropriate history and/or examination and high medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.



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# Evaluation and Management E/M (2)

Symbols	Codes	Code Description
#•	98008	Synchronous audio-only visit for the evaluation and management of a <b>new</b> patient, which requires a medically appropriate history and/or examination, straightforward medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 15 minutes must be met or exceeded.
#•	98009	Synchronous audio-only visit for the evaluation and management of a <b>new</b> patient, which requires a medically appropriate history and/or examination, low medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
#•	98010	Synchronous audio-only visit for the evaluation and management of a <b>new</b> patient, which requires a medically appropriate history and/or examination, moderate medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.
#•	98011	Synchronous audio-only visit for the evaluation and management of a <b>new</b> patient, which requires a medically appropriate history and/or examination, high medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.
#•	98012	Synchronous audio-only visit for the evaluation and management of an <b>established</b> patient, which requires a medically appropriate history and/or examination, straightforward medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 10 minutes must be exceeded.
#•	98013	Synchronous audio-only visit for the evaluation and management of an <b>established</b> patient, which requires a medically appropriate history and/or examination, low medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.



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# Evaluation and Management E/M (3)

Symbols	Codes	Code Description
#•	98014	Synchronous audio-only visit for the evaluation and management of an <b>established</b> patient, which requires a medically appropriate history and/or examination, moderate medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
#•	98015	Synchronous audio-only visit for the evaluation and management of an <b>established</b> patient, which requires a medically appropriate history and/or examination, high medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.
#•	98016	Brief communication technology-based service (e.g., virtual check-in) by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related evaluation and management service provided within the previous 7 days nor leading to an evaluation and management service or procedure within the next 24 hours or soonest available appointment, 5-10 minutes of medical discussion
★ ▲	98017	Education and training for patient self-management by a <b>nonphysician</b> qualified health professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; individual patient



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# Evaluation and Management E/M (4)

Symbols	Codes	Code Description
★ ▲	98961	Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; 2-4 patients
★ ▲	98962	Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; 5-8 patients
▲	98966	Telephone assessment and management service provided by a nonphysician qualified health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
▲	98967	Telephone assessment and management service provided by a nonphysician qualified health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion
▲	98968	Telephone assessment and management service provided by a nonphysician qualified health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion
▲	98970	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes



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# Evaluation and Management E/M (5)

Symbols	Codes	Code Description
▲	98971	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes
▲	98972	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes
▲	98975	Remote therapeutic monitoring (e.g., therapy adherence, therapy response, digital therapeutic intervention); initial set-up and patient education on use of equipment
▲	98976	Remote therapeutic monitoring (e.g., therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of respiratory system, each 30 days
▲	98977	Remote therapeutic monitoring (e.g., therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of musculoskeletal system, each 30 days
▲	98978	Remote therapeutic monitoring (e.g., therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of cognitive behavioral therapy, each 30 days
	99441	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes or medical discussion.
	99442	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes or medical discussion.



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# Evaluation and Management E/M (6)

Symbols	Codes	Code Description
	<b>99443</b>	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes or medical discussion.



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# Updates to Surgery

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These updates reflect advancements in medical procedures and technologies, aiming to enhance the precision and comprehensiveness of surgical coding. Healthcare providers should familiarize themselves with these changes to ensure accurate documentation and reimbursement.

## Impact of These Changes

- New and revised codes for advanced surgical techniques and procedures.
- Expanded coding for minimally invasive and robotic-assisted surgeries.
- Updates to skin grafting, tumor excision, and reconstructive surgery codes.
- Refinements to improve accuracy and alignment with modern surgical practices.



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# Integumentary System: Surgery

Symbols	Codes	Code Description
	<b>15011</b>	Harvest of skin for skin cell suspension autograft; first 25 sq cm or less
+•	<b>15012</b>	Harvest of skin for skin cell suspension autograft; each additional 25 sq cm or part thereof (List separately in addition to code for primary procedure)
•	<b>15013</b>	Preparation of skin cell suspension autograft, requiring enzymatic processing, manual mechanical disaggregation of skin cells, and filtration; first 25 sq cm or less of harvested skin
•	<b>15014</b>	Preparation of skin cell suspension autograft, requiring enzymatic processing, manual mechanical disaggregation of skin cells, and filtration; each additional 25 sq cm of harvested skin or part thereof (List separately in addition to code for primary procedure)
•	<b>15015</b>	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, trunk, arms, legs; first 480 sq cm or less
+•	<b>15016</b>	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, trunk, arms, legs; each additional 480 sq cm or part thereof (List separately in addition to code for primary procedure)
•	<b>15017</b>	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 480 sq cm or less
+•	<b>15018</b>	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 480 sq cm or part thereof (List separately in addition to code for primary procedure)
	<b>15019</b>	Cervicoplasty



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# Musculoskeletal System: Surgery (1)

Symbols	Codes	Code Description
▲	21630	Radical resection of sternum
	21632	<del>Radical resection of sternum; with mediastinal lymphadenectomy</del>
▲	25447	Arthroplasty, <u>interposition</u> , intercarpal or carpometacarpal joints; <u>interposition (e.g., tendon)</u>
•	25448	Arthroplasty, intercarpal or carpometacarpal joints; suspension, including transfer or transplant of tendon, with interposition, when performed



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# Cardiovascular System: Surgery

Symbols	Codes	Code Description
	<b>33471</b>	Valvotomy, pulmonary valve, closed heart, via pulmonary
	<b>33737</b>	Valvotomy, pulmonary valve, open heart, with inflow occlusion
	<b>33813</b>	Obliteration of aortopulmonary septal defect; without cardiopulmonary bypass
▲	<b>33814</b>	Obliteration of aortopulmonary septal defect, <u>with cardiopulmonary bypass</u> ; <u>with cardiopulmonary bypass</u>
#•	<b>38225</b>	Chimeric antigen receptor T-cell (CAR-T) therapy; harvesting of blood-derived T lymphocytes for development of genetically modified autologous CAR-T cells, per day
#•	<b>38226</b>	Chimeric antigen receptor T-cell (CAR-T) therapy; preparation of blood-derived T lymphocytes for transportation (eg, cryopreservation, storage)
#•	<b>38827</b>	Chimeric antigen receptor T-cell (CAR-T) therapy; receipt and preparation of CAR-T cells for administration
#•	<b>38828</b>	Chimeric antigen receptor T-cell (CAR-T) therapy; CAR-T cell administration, autologous



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# Digestive System: Surgery

Symbols	Codes	Code Description
	<b>47802</b>	<del>U tube hepatic enterostomy</del>
•	<b>49186</b>	Excision or destruction, open, intra-abdominal (i.e., peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 5 cm or less
•	<b>49187</b>	Excision or destruction, open, intra-abdominal (i.e., peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 5.1 to 10 cm
•	<b>49188</b>	Excision or destruction, open, intra-abdominal (i.e., peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 10.1 to 20 cm
•	<b>49189</b>	Excision or destruction, open, intra-abdominal (i.e., peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 20.1 to 30 cm
•	<b>49190</b>	Excision or destruction, open, intra-abdominal (i.e., peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); greater than 30 cm
	<b>49203</b>	<del>Excision or destruction, open, intra abdominal tumors, cysts or endometriomas, 1 or more peritoneal, mesenteric, or retroperitoneal primary or secondary tumors; largest tumor 5 cm diameter or less</del>
	<b>49204</b>	<del>Excision or destruction, open, intra abdominal tumors, cysts or endometriomas, 1 or more peritoneal, mesenteric, or retroperitoneal primary or secondary tumors; largest tumor 5.1-10.0 cm diameter</del>
	<b>49205</b>	<del>Excision or destruction, open, intra abdominal tumors, cysts or endometriomas, 1 or more peritoneal, mesenteric, or retroperitoneal primary or secondary tumors; largest tumor greater than 10.0 cm diameter</del>



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# Urinary System: Surgery

Symbols	Codes	Code Description
	<b>50135</b>	<del>Peotomy; complicated (e.g., secondary operation, congenital kidney abnormality)</del>
▲	<b>51020</b>	<del>Cystotomy or cystostomy, with fulguration and/or insertion of radioactive material; with fulguration and/or insertion of radioactive material</del>
	<b>51030</b>	<del>Cystotomy or cystostomy; with cryosurgical destruction of intravesical lesion</del>
•	<b>51721</b>	Insertion of transurethral ablation transducer for delivery of thermal ultrasound for prostate tissue ablation, including suprapubic tube placement during the same session and placement of an endorectal cooling device, when performed
•	<b>53865</b>	Cystourethroscopy with insertion of temporary device for ischemic remodeling (i.e., pressure necrosis) of bladder neck and prostate
•	<b>53866</b>	Catheterization with removal of temporary device for ischemic remodeling (i.e., pressure necrosis) of bladder neck and prostate
	<b>54438</b>	<del>Replantation, penis, complete amputation including urethral repair</del>
•	<b>55881</b>	Ablation of prostate tissue, transurethral, using thermal ultrasound, including magnetic resonance imaging guidance for, and monitoring of, tissue ablation
•	<b>55882</b>	Ablation of prostate tissue, transurethral, using thermal ultrasound, including magnetic resonance imaging guidance for, and monitoring of, tissue ablation; with insertion of transurethral ultrasound transducer for delivery of thermal ultrasound, including suprapubic tube placement and placement of an endorectal cooling device, when performed
	<b>58987</b>	<del>Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed</del>
▲	<b>58958</b>	<del>Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed, with pelvic lymphadenectomy and limited para-aortic lymphadenectomy; with pelvic lymphadenectomy; and limited para-aortic lymphadenectomy</del>



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# Endocrine, Nervous, & Eye: Ocular Adnexa System: Surgery

Symbols	Codes	Code Description
•	60660	Ablation of 1 or more thyroid nodule(s), one lobe or the isthmus, percutaneous, including imaging guidance, radiofrequency
+•	60661	Ablation of 1 or more thyroid nodule(s), additional lobe, percutaneous, including imaging guidance, radiofrequency (List separately in addition to code for primary procedure)
•	61715	Magnetic resonance image guided high intensity focused ultrasound (MRgFUS), stereotactic ablation of target, intracranial, including stereotactic navigation and frame placement, when performed
#•	64466	Thoracic fascial plane block, unilateral; by injection(s), including imaging guidance, when performed
#•	64467	Thoracic fascia I plane block, unilateral; by continuous infusion(s), including imaging guidance, when performed
#•	64468	Thoracic fascial plane block, bilateral; by injection(s), including imaging guidance, when performed
#•	64469	Thoracic fascia I plane block, bilateral; by continuous infusion(s), including imaging guidance, when performed
#•	64473	Lower extremity fascial plane block, unilateral; by injection(s), including imaging guidance, when performed
#•	64474	Lower extremity fascial plane block, unilateral; by continuous infusion(s), including imaging guidance, when performed
•	66683	Implantation of iris prosthesis, including suture fixation and repair or removal of iris, when performed



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# Updates to Radiology

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The 2025 CPT Code Set includes changes in Radiology, reflecting advancements in imaging technology, AI integration, and updated coding for diagnostic and interventional radiology.

## Impact of These Changes

- Improves coding precision & reimbursement
- Recognizes AI's role in imaging interpretation
- Supports minimally invasive & interventional techniques
- Expands radiology pain management coding



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# Radiology

Symbols	Codes	Code Description
#•	76014	MR safety implant and/or foreign body assessment by trained clinical staff, including identification and verification of implant components from appropriate sources (e.g., surgical reports, imaging reports, medical device databases, device vendors, review of prior imaging), analyzing current MR conditional status of individual components and systems, and consulting published professional guidance with written report; initial 15 minutes.
#+•	76015	MR safety implant and/or foreign body assessment by trained clinical staff, including identification and verification of implant components from appropriate sources (e.g., surgical reports, imaging reports, medical device databases, device vendors, review of prior imaging), analyzing current MR conditional status of individual components and systems, and consulting published professional guidance with written report; each additional 30 minutes (List separately in addition to code for primary procedure)
#•	76016	MR safety determination by a physician or other qualified health care professional responsible for the safety of the MR procedure, including review of implant MR conditions for indicated MR examination, analysis of risk vs clinical benefit of performing MR examination, and determination of MR equipment, accessory equipment, and expertise required to perform examination, with written report
#⌚•	76017	MR safety medical physics examination customization, planning and performance monitoring by medical physicist or MR safety expert, with review and analysis by physician or other qualified health care professional to prioritize and select views and imaging sequences, to tailor MR acquisition specific to restrictive requirements or artifacts associated with MR conditional implants or to mitigate risk of non-conditional implants or foreign bodies, with written report
#⌚•	76018	MR safety implant electronics preparation under supervision of physician or other qualified health care professional, including MR-specific programming of pulse generator and/or transmitter to verify device integrity, protection of device internal circuitry from MR electromagnetic fields, and protection of patient from risks of unintended stimulation or heating while in the MR room, with written report
#⌚•	76019	MR safety implant positioning and/or immobilization under supervision of physician or other qualified health care professional, including application of physical protections to secure implanted medical device from MR-induced translational or vibrational forces, magnetically induced functional changes, and/or prevention of radiofrequency burns from inadvertent tissue contact while in the MR room, with written report



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# Updates to Pathology and Laboratory

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The 2025 CPT updates for Pathology & Laboratory focus on expanded molecular diagnostics, AI-assisted pathology, and streamlined coding for clinical lab procedures. These updates enhance precision, automation, and efficiency in diagnostic testing

## 2025 Pathology & Laboratory PLA Updates – Overview

- Expansion of PLA Codes – New proprietary lab codes introduced for genetic, molecular, and infectious disease testing.
- Emphasis on Personalized Medicine – More codes supporting customized diagnostic assays and lab-developed tests (LDTs).
- AI & Digital Pathology Integration – New PLA codes reflecting AI-assisted diagnostics in pathology and laboratory workflows.
- Deletions & Revisions – Removal of obsolete or redundant PLA codes to enhance clarity and efficiency in test reporting.
- Improved Billing & Compliance – Updates align with payer policies to ensure accurate reimbursement and claim approvals.



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# Pathology and Laboratory

Symbols	Codes	Code Description
# •	81195	Cytogenetic (genome-wide) analysis, hematologic malignancy, structural variants and copy number variants, optical genome mapping (OGM)
▲	81432	Hereditary breast cancer-related disorders (e.g., hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer, <u>hereditary pancreatic cancer, hereditary prostate cancer</u> ). <u>genomic sequence analysis panel, 5 or more genes, interrogation for sequence variants and copy number variants; genomic sequence analysis panel, must include sequencing of at least 10 genes, always including BRCA1, BRCA2, CDH1, MLH1, MSH2, MSH6, PALB2, PTEN, STK11, and TP53</u>
	81433	Hereditary breast cancer-related disorders (e.g., hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer): <u>duplication/deletion analysis panel, must include analysis for BRCA1, BRCA2, MLH1, MSH2, and STK11</u>
▲	81435	Hereditary colon cancer-related disorders (e.g., Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis), <u>genomic sequence analysis panel, 5 or more genes, interrogation for sequence variants and copy number variants; genomic sequence analysis panel, must include sequencing of at least 10 genes, including APC, BMPR1A, CDH1, MLH1, MSH2, MSH6, MUTYH, PTEN, SMAD4, and STK11</u>
	81436	Hereditary colon cancer disorders (e.g., Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis); <u>duplication/deletion analysis panel, must include analysis of at least 5 genes, including MLH1, MSH2, EPCAM, SMAD4, and STK11</u>
▲	81437	Hereditary neuroendocrine tumor-related disorders (e.g., medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma), <u>genomic sequence analysis panel, 5 or more genes, interrogation for sequence variants and copy number variants; genomic sequence analysis panel, must include sequencing of at least 6 genes, including MAX, SDHB, SDHC, SDHD, TMEM127, and VHL</u>



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# Pathology and Laboratory (1)

Symbols	Codes	Code Description
	<b>81438</b>	Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); duplication/deletion analysis panel, must include analyses for SDHB, SDHC, SDHD, and VHL
•	<b>81515</b>	Infectious disease, bacterial vaginosis and vaginitis, real-time PCR amplification of DNA markers for Autopodium vaginae, Atopobium species, Megasphaera type 1, and Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), utilizing vaginal-fluid specimens, algorithm reported as positive or negative for high likelihood of bacterial vaginosis, includes separate detection of Trichomonas vaginalis and Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata/Candida krusei, when reported
•	<b>81558</b>	Transplantation medicine (allograft rejection, kidney), mRNA, gene expression profiling by quantitative polymerase chain reaction (qPCR) of 139 genes, utilizing whole blood, algorithm reported as a binary categorization as transplant excellence, which indicates immune quiescence, or not transplant excellence, indicating subclinical rejection
•	<b>82233</b>	Beta-amyloid; 1-40 (Abeta 40)



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# Chemistry: Pathology and Laboratory

Symbols	Codes	Code Description
•	<b>82234</b>	Beta-amyloid; 1-42 (Abeta 42)
•	<b>83884</b>	Neurofilament light chain (Nfl)
•	<b>84393</b>	Tau, phosphorylated (eg, pTau 181, pTau 217), each
•	<b>84394</b>	Tau, total (tTau)
	<b>86327</b>	<del>immuno</del> electrophoresis; crossed (2-dimensional assay)
	<b>86490</b>	<del>skin</del> test; coccidioidomycosis
•	<b>86581</b>	Streptococcus pneumoniae antibody (IgG), serotypes, multiplex immunoassay, quantitative
•	<b>87513</b>	Infectious agent detection by nucleic acid (DNA or RNA); Helicobacter pylori (H. pylori), clarithromycin resistance, amplified probe technique
#•	<b>87564</b>	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacterium tuberculosis, rifampin resistance, amplified probe technique
•	<b>87594</b>	Infectious agent detection by nucleic acid (DNA or RNA); Pneumocystis jirovecii, amplified probe technique



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# Pathology and Laboratory (2)

Symbols	Codes	Code Description
#	87624	Human Papillomavirus (HPV), high-risk types (e.g., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68), <u>pooled result</u>
#•	87626	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), separately reported high-risk types (e.g., 16, 18, 31, 45, 51, 52) and high-risk pooled result(s)
▲	88387	Macroscopic examination, dissection, and preparation of tissue for non-microscopic analytical studies (e.g., nucleic acid-based molecular studies), <u>each tissue preparation</u> (e.g., a single lymph node); <u>each tissue preparation</u> (e.g., a single lymph node)
	88388	Macroscopic examination, dissection, and preparation of tissue for non-microscopic analytical studies (e.g., nucleic acid-based molecular studies); in conjunction with a touch imprint, intraoperative consultation, or frozen section, <u>each tissue preparation</u> (e.g., a single lymph node) (List separately in addition to code for primary procedure)
	0078U	Pain management (opioid use disorder) genotyping panel, 16 common variants (i.e., ABCB1, COMT, DAT1, DBH, DOR, DRDI, DRD2, DRD4, GABA, GAL, HTR2A, HTTLPR, MTHFR, MUOR, OPRK1, OPRM1), buccal swab or other germline tissue sample, algorithm reported as positive or negative risk of opioid use disorder
▲	0095U	Eosinophilic esophagitis, <u>2 protein biomarkers</u> (Eotaxin-3 [CCL26 {C-C motif chemokine ligand 26}] and $\alpha$ -Major $\beta$ -Basic pProtein [PRG2 {proteoglycan 2, pro eosinophil major basic protein}]), enzyme-linked immunosorbent assays (ELISA), specimen obtained by esophageal string test device, algorithm reported as probability of active or inactive eosinophilic esophagitis
	0167U	Gonadotropin, chorionic (hCG), immuneassay with direct optical observation, blood
	0204U	Oncology (thyroid), mRNA, gene expression analysis of 593 genes (including BRAF, RAS, RET, PAX8, and NTRK) for sequence variants and rearrangements, utilizing fine needle aspirate, reported as detected or not detected
▲	0248U	Oncology(brain), spheroid cell culture in a 3D microenvironment, 12-drug panel, <u>tumor brain or brain metastasis</u> -response prediction for each drug



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# Pathology and Laboratory (3)

Symbols	Codes	Code Description
	0346U	Beta Amyloid, A 40 And A 42 By Liquid Chromatography With Tandem Mass Spectrometry (Le Ms/Ms), Ratio, Plasma
▲	0351U	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), separately reported high-risk types (e.g., 16, 18, 31, 45, 51, 52) and high-risk pooled result(s)
	0352U	Infectious disease (bacterial vaginosis and vaginitis), multiplex amplified probe technique, for detection of bacterial vaginosis-associated bacteria (BVAB-2, Atopobium vaginae, and Megasphaera type 1), algorithm reported as detected or not detected and separate detection of Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata/Candida krusei, and trichomonas vaginalis, vaginal fluid specimen, each result reported as detected or not detected
	0353U	Infectious agent detection by nucleic acid (DNA), Chlamydia trachomatis and Neisseria gonorrhoeae, multiplex amplified probe technique, urine, vaginal, pharyngeal, or rectal, each pathogen reported as detected or not detected
	0356U	Human papilloma virus (HPV), high-risk types (i.e., 16, 18, 31, 33, 45, 52 and 58) qualitative mRNA expression of E6/E7 by quantitative polymerase chain reaction (qPCR)
▲	0356U	Oncology (oropharyngeal <u>or</u> anal), evaluation of 17 DNA biomarkers using droplet digital PCR (ddPCR), cell-free DNA, algorithm reported as a prognostic risk score for cancer recurrence
▲	0365U	Oncology (bladder), <u>analysis of 10 protein biomarkers (AIAT, ANG, APOE, CA9, IL8, MMP9, MMPIO, PAI1, SDC1 and VEGFA), by immunoassays, urine, diagnostic algorithm, including patient's age, race and gender, reported as a probability of harboring urothelial bladder cancer</u>
	0380U	Drug Metabolism (Adverse Drug Reactions And Drug Response), Targeted Sequence Analysis, 20 Gene Variants And Cyp2D6 Deletion Or Duplication Analysis With Reported Genotype And Phenotype
	0248U	Obstetrics (pre-implantation genetic testing), evaluation of 300000 DNA single nucleotide polymorphisms (SNPs) by microarray, embryonic tissue, algorithm reported as a probability for single gene germline conditions



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# Pathology and Laboratory (4)

Symbols	Codes	Code Description
▲	0403U	Oncology (prostate), mRNA, gene expression profiling of 18 genes, first-catch <del>post digital rectal examination urine (or processed first catch urine)</del> , algorithm reported as percentage of likelihood of detecting clinically significant prostate cancer
	0416U	Infectious agent detection by nucleic acid (DNA), genitourinary pathogens, identification of 20 bacterial and fungal organisms, including identification of 20 associated antibiotic resistance genes, if performed, multiplex amplified probe technique, urine
•	0420U	Oncology (urothelial), mRNA expression profiling by real-time quantitative PCR of MOK, HOXA13, CDC2, IGFBPS, and CXCR2 in combination with droplet digital PCR (ddPCR) analysis of 6 single-nucleotide polymorphisms (SNPs) of genes TERT and FGFR3, urine, algorithm reported as a risk score for urothelial carcinoma
•	0421U	Infectious agent detection by nucleic acid (DNA), <del>Chlamydia trachomatis and Neisseria gonorrhoeae</del> , multiplex amplified probe technique, urine, vaginal, pharyngeal, or rectal, each pathogen reported as detected or not detected
•	0422U	Oncology (pan-solid tumor), analysis of DNA biomarker response to anti-cancer therapy using cell-free circulating DNA, biomarker comparison to a previous baseline <del>pre-treatment cell-free circulating DNA analysis using next-generation sequencing</del> , algorithm reported as a quantitative change from baseline, including specific alterations, if appropriate
•	0423U	Psychiatry (e.g., depression, anxiety), genomic analysis panel, including variant analysis of 26 genes, buccal swab, report including metabolizer status and risk of drug toxicity by condition
•	0424U	Oncology (prostate), exosome-based analysis of 53 small noncoding RNAs (sncRNAs) by quantitative reverse transcription polymerase chain reaction (RT-qPCR), urine, reported as no molecular evidence, low-, moderate-, or elevated-risk of prostate cancer
•	0425U	Genome (e.g., unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis, each comparator genome (eg, parents, siblings)
•	0426U	Genome (e.g., unexplained constitutional or heritable disorder or syndrome), ultra-rapid sequence analysis
•	0427U	Monocyte distribution width, whole blood (List separately in addition to code for primary procedure)



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# Pathology and Laboratory (5)

Symbols	Codes	Code Description
	0428U	Oncology (prostate), mRNA, gene expression profiling of 18 genes, first-catch <del>post digital rectal examination urine (or processed first catch urine)</del> , algorithm reported as percentage of likelihood of detecting clinically significant prostate cancer
•	0429U	Human papillomavirus (HPV), oropharyngeal swab, 14 high-risk types (i.e., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, and 68)
•	0430U	Gastroenterology, malabsorption evaluation of alpha-1-antitrypsin, calprotectin, pancreatic elastase and reducing substances, feces, quantitative
•	0431U	Glycine receptor alpha IgG, serum or cerebrospinal fluid (CSF), live cell-binding assay (LCBA), qualitative
•	0432U	Kelch-like protein 11 (KLHL11) antibody, serum or cerebrospinal fluid (CSF), cell-binding assay, qualitative
•	0433U	Oncology (prostate), 5 DNA regulatory markers by quantitative PCR, whole blood, algorithm, including prostate-specific antigen, reported as likelihood of cancer
•	0434U	Drug metabolism (adverse drug reactions and drug response), genomic analysis panel, variant analysis of 25 genes with reported phenotypes
•	0435U	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on cytotoxicity percentage observed, minimum of 14 drugs or drug combinations
•	0436U	Oncology {lung}, plasma analysis of 388 proteins, using aptamer-based proteomics technology, predictive algorithm reported as clinical benefit from immune checkpoint inhibitor therapy
•	0437U	Psychiatry {anxiety disorders}, mRNA, gene expression profiling by RNA sequencing of 15 biomarkers, whole blood, algorithm reported as predictive risk score
•	0438U	Monocyte distribution width, whole blood (List separately in addition to code for primary procedure)
•	0439U	Cardiology {coronary heart disease [CHD]}, DNA, analysis of 5 single-nucleotide polymorphisms {SNPs} {rs11716050 [LOC105376934], rs6560711 [WDR37], rs3735222 [SCIN/LOC107986769], rs6820447 [intergenic], and rs9638144 [ESYT2]} and 3 DNA methylation markers {cg00300879 [transcription start site {TSS200} of CNKSRI], cg09552548 [intergenic], and cg14789911 [body of SPATCIL]}, qPCR and digital PCR, whole blood, algorithm reported as a 4-tiered risk score for a 3-year risk of symptomatic CHD



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# Pathology and Laboratory (6)

Symbols	Codes	Code Description
•	0440U	Cardiology (coronary heart disease [CHO]), DNA, analysis of 10 single-nucleotide polymorphisms (SNPs) (rs710987 [LINC010019], rs1333048 [CDKN2B-AS1], rs12129789 [KCND3], rs942317 [KTNI-ASI], rs1441433 [PPP3CA], rs2869675 [PREXI], rs4639796 [ZBTB41], rs4376434 [LINC00972], rs12714414 [TMEM18], and rs7585056 [TMEM18]) and 6 DNA methylation markers (cg03725309 [SARS1], cg12586707 [CXCLI], cg04988978 [MPO], cg17901584 [DHCR24-DT], cg21161138 [AHRR], and cg12655112 [EHD4]), qPCR and digital PCR, whole blood, algorithm reported as detected or not detected for CHO
•	0441U	Infectious disease (bacterial, fungal, or viral infection), semiquantitative biomechanical assessment (via deformability cytometry), whole blood, with algorithmic analysis and result reported as an index
•	0442U	Infectious disease (respiratory infection), Myxovirus resistance protein A (MxA) and C-reactive protein (CRP), fingerstick whole blood specimen, each biomarker reported as present or absent
•	0443U	Neurofilament light chain (NfL), ultra-sensitive immunoassay, serum or cerebrospinal fluid
•	0444U	Oncology (solid organ neoplasia), targeted genomic sequence analysis panel of 361 genes, interrogation for gene fusions, translocations, or other rearrangements, using DNA from formalin-fixed paraffin-embedded (FFPE) tumor tissue, report of clinically significant variant(s)
•	0445U	B-amyloid (Abeta42) and phospho tau (181P) (pTau181), electro chemiluminescent immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology
•	0446U	Autoimmune diseases (systemic lupus erythematosus [SLE]), analysis of 10 cytokine soluble mediator biomarkers by immunoassay, plasma, individual components reported with an algorithmic risk score for current disease activity
•	0447U	Autoimmune diseases (systemic lupus erythematosus [SLE]), analysis of 11 cytokine soluble mediator biomarkers by immunoassay, plasma, individual components reported with an algorithmic prognostic risk score for developing a clinical flare
	0448U	Oncology (lung and colon cancer), DNA, qualitative, next-generation sequencing detection of single nucleotide variants and deletions in EGFR and KRAS genes, formalin-fixed paraffin embedded (FFPE) solid tumor samples, reported as presence or absence of targeted mutation(s), with recommended therapeutic options



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# Pathology and Laboratory (7)

Symbols	Codes	Code Description
•	0455U	Infectious agents (sexually transmitted infection), Chlamydia trachomatis, Neisseria gonorrhoeae, and Trichomonas vaginalis, multiplex amplified probe technique, vaginal, endocervical, gynecological specimens, oropharyngeal swabs, rectal swabs, female or male urine, each pathogen reported as detected or not detected
•	0456U	Autoimmune (Rheumatoid Arthritis), Next Generation Sequencing (Ngs), Gene Expression Testing Of 19 Genes, Whole Blood, With Analysis Of Anti-Cyclic Citrullinated Peptides (Cep) Levels, Combined With Sex, Patient Global Assessment, And Body Mass Index (Bmi), Algorithm Reported As A Score That Predicts + \nonresponse To Tumor Necrosis Factor Inhibitor (Tnfi) Therapy
•	0457U	Perfluoroalkyl substances (PFAS) (e.g., perfluorooctanoic acid, perfluoro octane sulfonic acid), 9 PFAS compounds by LC-MS/MS, plasma or serum, quantitative
•	0458U	Oncology (breast cancer), S100A8 and S100A9, by enzyme-linked immunosorbent assay (ELISA), tear fluid with age, algorithm reported as a risk score
•	0459U	B-amyloid (Abeta42) and total tau (tTau), electro chemiluminescent immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology
•	0460U	Oncology, whole blood or buccal, DNA single-nucleotide polymorphism (SNP) genotyping by real-time PCR of 24 genes, with variant analysis and reported phenotypes
•	0461U	Melatonin levels test, sleep study, 7 or 9 sample melatonin profile (cortisol optional), enzyme linked immunosorbent assay (ELISA), saliva, screening/preliminary
•	0462U	Oncology (cervix), mRNA gene expression profiling of 14 biomarkers (E6 and E7 of the highest risk human papillomavirus [HPV] types 16, 18, 31, 33, 45, 52, 58), by real-time nucleic acid sequence-based amplification (NASBA), exo- or endocervical epithelial cells, algorithm reported as positive or negative for increased risk of cervical dysplasia or cancer for each biomarker
•	0463U	Oncology (lung and colon cancer), DNA, qualitative, next-generation sequencing detection of single nucleotide variants and deletions in EGFR and KRAS genes, formalin fixed paraffin embedded (FFPE) solid tumor samples, reported as presence or absence of targeted mutation(s), with recommended therapeutic options
•	0464U	Oncology (colorectal) screening, quantitative real-time target and signal amplification, methylated DNA markers, including LASS4, LRRC4 and PPP2R5C, a reference marker ZDHHC1, and a protein marker (fecal hemoglobin), utilizing stool, algorithm reported as a positive or negative result



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# Pathology and Laboratory (8)

Symbols	Codes	Code Description
•	0465U	Oncology (urothelial carcinoma), DNA, quantitative methylation-specific PCR of 2 genes (ONECUT2, VIM), algorithmic analysis reported as positive or negative
•	0466U	Cardiology (coronary artery disease [CAD]), DNA, genome-wide association studies (564856 single-nucleotide polymorphisms [SNPs], targeted variant genotyping), patient lifestyle and clinical data, buccal swab, algorithm reported as polygenic risk to acquired heart disease
•	0467U	Oncology (bladder), DNA, next-generation sequencing (NGS) of 60 genes and whole genome aneuploidy, urine, algorithms reported as minimal residual disease (MRD) status positive or negative and quantitative disease burden
•	0468U	Hepatology (nonalcoholic steatohepatitis [NASH]), miR-34a-5p, alpha 2-macroglobulin, YKL40, HbA1c, serum and whole blood, algorithm reported as a single score for NASH activity and fibrosis
•	0469U	Rare diseases (constitutional/heritable disorders), whole genome sequence analysis for chromosomal abnormalities, copy number variants, duplications/deletions, inversions, unbalanced translocations, regions of homozygosity (ROH), inheritance pattern that indicate uniparental disomy (UPD), and aneuploidy, fetal sample (amniotic fluid, chorionic villus sample, or products of conception), identification and categorization of genetic variants, diagnostic report of fetal results based on phenotype with maternal sample and paternal sample, if performed, as comparators and/or maternal cell contamination
•	0470U	Oncology (oropharyngeal), detection of minimal residual disease by next-generation sequencing (NGS) based quantitative evaluation of 8 DNA targets, cell-free HPV 16 and 18 DNA from plasma
•	0471U	Oncology (colorectal cancer), qualitative real-time PCR of 35 variants of KRAS and NRAS genes (exons 2, 3, 4), formalin-fixed paraffin-embedded (FFPE), predictive, identification of detected mutations
•	0472U	Carbonic anhydrase VI (CA VI), parotid specific/secretory protein (PSP) and salivary protein (SPI) IgG, IgM, and IgA antibodies, enzyme-linked immunosorbent assay (ELISA), semiquantitative, blood, reported as predictive evidence of early Sjogren's syndrome
•	0473U	Oncology (solid tumor), next-generation sequencing (NGS) of DNA from formalin-fixed paraffin-embedded (FFPE) tissue with comparative sequence analysis from a matched normal specimen (blood or saliva), 648 genes, interrogation for sequence variants, insertion and deletion alterations, copy number variants, rearrangements, microsatellite instability, and tumor-mutation burden



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# Pathology and Laboratory (9)

Symbols	Codes	Code Description
•	0474U	Hereditary pan-cancer (e.g., hereditary sarcomas, hereditary endocrine tumors, hereditary neuroendocrine tumors, hereditary cutaneous melanoma), genomic sequence analysis panel of 88 genes with 20 duplications/deletions using next-generation sequencing (NGS), Sanger sequencing, blood or saliva, reported as positive or negative for germline variants, each gene
•	0475U	Hereditary prostate cancer-related disorders, genomic sequence analysis panel using next generation sequencing (NGS), Sanger sequencing, multiplex ligation-dependent probe amplification (MLPA), and array comparative genomic hybridization (CGH), evaluation of 23 genes and duplications/deletions when indicated, pathologic mutations reported with a genetic risk score for prostate cancer
•	0476U	Drug metabolism, psychiatry (eg, major depressive disorder, general anxiety disorder, attention deficit hyperactivity disorder [ADHD], schizophrenia), whole blood, buccal swab, and pharmacogenomic genotyping of 14 genes and CYP2D6 copy number variant analysis and reported phenotypes
•	0477U	Drug metabolism, psychiatry (eg, major depressive disorder, general anxiety disorder, attention deficit hyperactivity disorder [ADHD], schizophrenia), whole blood, buccal swab, and pharmacogenomic genotyping of 14 genes and CYP2D6 copy number variant analysis, including impacted gene-drug interactions and reported phenotypes
•	0478U	Oncology (non-small cell lung cancer), DNA and RNA, digital PCR analysis of 9 genes (EGFR, KRAS, BRAF, ALK, ROS1, RET, NTRK 1/2/3, ERBB2, and MET) in formalin-fixed paraffin embedded (FFPE) tissue, interrogation for single-nucleotide variants, insertions/deletions, gene rearrangements, and reported as actionable detected variants for therapy selection
•	0479U	Tau, phosphorylated, pTau217
•	0480U	Infectious disease (bacteria, viruses, fungi, and parasites), cerebrospinal fluid (CSF), metagenomic next-generation sequencing (DNA and RNA), bioinformatic analysis, with positive pathogen identification
•	0481U	IDH1 (isocitrate dehydrogenase 1 [NADP+]), IDH2 (isocitrate dehydrogenase 2 [NADP+]), and TERT (telomerase reverse transcriptase) promoter (eg, central nervous system [CNS] tumors), next-generation sequencing (single-nucleotide variants [SNV], deletions, and insertions)



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# Pathology and Laboratory (10)

Symbols	Codes	Code Description
•	0482U	Obstetrics (preeclampsia), biochemical assay of soluble fms-like tyrosine kinase 1 (sFlt-1) and placental growth factor (PIGF), serum, ratio reported for sFlt-1/PIGF, with risk of progression for preeclampsia with severe features within 2 weeks
•	0483U	Infectious disease ( <i>Neisseria gonorrhoeae</i> ), sensitivity, ciprofloxacin resistance ( <i>gyrA</i> S91F point mutation), oral, rectal, or vaginal swab, algorithm reported as probability of fluoroquinolone resistance
•	0484U	Infectious disease ( <i>Mycoplasma genitalium</i> ), macrolide sensitivity (23S rRNA point mutation), oral, rectal, or vaginal swab, algorithm reported as probability of macrolide resistance
•	0485U	Oncology (solid tumor), cell-free DNA and RNA by next-generation sequencing, interpretative report for germline mutations, clonal hematopoiesis of indeterminate potential, and tumor derived single-nucleotide variants, small insertions/deletions, copy number alterations, fusions, microsatellite instability, and tumor mutational burden
•	0486U	Oncology (pan-solid tumor), next-generation sequencing analysis of tumor methylation markers present in cell-free circulating tumor DNA, algorithm reported as quantitative measurement of methylation as a correlate of tumor fraction
•	0487U	Oncology (solid tumor), cell-free circulating DNA, targeted genomic sequence analysis panel of 84 genes, interrogation for sequence variants, aneuploidy-corrected gene copy number amplifications and losses, gene rearrangements, and microsatellite instability
•	0488U	Obstetrics (fetal antigen noninvasive prenatal test), cell-free DNA sequence analysis for detection of fetal presence or absence of 1 or more of the Rh, C, c, D, E, Duffy (Fya), or Kell (K) antigen in all immunized pregnancies, reported as selected antigen(s) detected or not detected
•	0489U	Obstetrics (single-gene noninvasive prenatal test), cell-free DNA sequence analysis of 1 or more targets (eg, CFTR, SMN1, HBB, HBA1, HBA2) to identify paternally inherited pathogenic variants, and relative mutation-dosage analysis based on molecular counts to determine fetal inheritance of maternal mutation, algorithm reported as a fetal risk score for the condition (e.g., cystic fibrosis, spinal muscular atrophy, beta hemoglobinopathies [including sickle cell disease], alpha thalassemia)



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# Pathology and Laboratory (11)

Symbols	Codes	Code Description
•	0490U	Oncology (cutaneous or uveal melanoma}, circulating tumor cell selection, morphological characterization and enumeration based on differential CD146, high molecular-weight melanoma-associated antigen, CD34 and CD45 protein biomarkers, peripheral blood
•	0491U	Oncology (solid tumor}, circulating tumor cell selection, morphological characterization and enumeration based on differential epithelial cell adhesion molecule (EpCAM), cytokeratin's 8, 18, and 19, CD45 protein biomarkers, and quantification of estrogen receptor (ER) protein biomarker-expressing cells, peripheral blood
•	0492U	Oncology (solid tumor}, circulating tumor cell selection, morphological characterization and enumeration based on differential epithelial cell adhesion molecule (EpCAM), cytokeratin's 8, 18, and 19, CD45 protein biomarkers, and quantification of PD-L1 protein biomarker expressing cells, peripheral blood
•	0493U	Transplantation medicine, quantification of donor-derived cell-free DNA (cfDNA) using next generation sequencing, plasma, reported as percentage of donor-derived cell-free DNA
•	0494U	Red blood cell antigen (fetal RhD gene analysis), next-generation sequencing of circulating cell free DNA (cfDNA) of blood in pregnant individuals known to be RhD negative, reported as positive or negative
•	0495U	Oncology (prostate), analysis of circulating plasma proteins (tPSA, fPSA, KLK2, PSP94, and GDF15), germline polygenic risk score (60 variants), clinical information (age, family history of prostate cancer, prior negative prostate biopsy), algorithm reported as risk of likelihood of detecting clinically significant prostate cancer
•	0496U	Oncology (colorectal), cell-free DNA, 8 genes for mutations, 7 genes for methylation by real time RT-PCR, and 4 proteins by enzyme-linked immunosorbent assay, blood, reported positive or negative for colorectal cancer or advanced adenoma risk
•	0497U	Oncology (prostate), mRNA gene-expression profiling by real-time RT-PCR of 6 genes (FOXMI, MCM3, MTUS1, TTC21B, ALAS1, and PPP2CA), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a risk score for prostate cancer
•	0498U	Oncology (colorectal), next-generation sequencing for mutation detection in 43 genes and methylation pattern in 45 genes, blood, and formalin-fixed paraffin-embedded (FFPE) tissue, report of variants and methylation pattern with interpretation



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# Pathology and Laboratory (12)

Symbols	Codes	Code Description
•	0499U	Oncology (colorectal and lung), DNA from formalin-fixed paraffin-embedded (FFPE) tissue, next-generation sequencing of 8 genes (NRAS, EGFR, CTNNBI, PIK3CA, APC, BRAF, KRAS, and TP53), mutation detection
•	0500U	Autoinflammatory disease (VEXAS syndrome), DNA, UBA1 gene mutations, targeted variant analysis (M41T, M41V, M41L, c.118-2A>C, c.118-9_118-2del, S56F, S621C)
•	0501U	Oncology (colorectal), blood, quantitative measurement of cell-free DNA (cfDNA)
•	0502U	Human papillomavirus (HPV), E6/E7 markers for high-risk types (16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, and 68), cervical cells, branched-chain capture hybridization, reported as negative or positive for high risk for HPV
•	0503U	Neurology (Alzheimer disease), beta amyloid (A 40, A 42, A 42/40 ratio) and tau-protein (ptau217, np-tau217, ptau217/np-tau217 ratio), blood, immunoprecipitation with quantitation by liquid chromatography with tandem mass spectrometry (LC-MS/MS), algorithm score reported as likelihood of positive or negative for amyloid plaques
•	0504U	Infectious disease (urinary tract infection), identification of 17 pathologic organisms, urine, real-time PCR, reported as positive or negative for each organism
•	0505U	Infectious disease (vaginal infection), identification of 32 pathogenic organisms, swab, real time PCR, reported as positive or negative for each organism
•	0506U	Gastroenterology (Barrett's esophagus), esophageal cells, DNA methylation analysis by next generation sequencing of at least 89 differentially methylated genomic regions, algorithm reported as likelihood for Barrett's esophagus
•	0507U	Oncology (ovarian), DNA, whole-genome sequencing with 5-hydroxymethylcytosine (ShmC) enrichment, using whole blood or plasma, algorithm reported as cancer detected or not detected
•	0508U	Transplantation medicine, quantification of donor-derived cell-free DNA using 40 single nucleotide polymorphisms (SNPs), plasma, and urine, initial evaluation reported as percentage of donor-derived cell-free DNA with risk for active rejection



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# Pathology and Laboratory (13)

Symbols	Codes	Code Description
•	0509U	Transplantation medicine, quantification of donor-derived cell-free DNA using up to 12 single nucleotide polymorphisms (SNPs) previously identified, plasma, reported as percentage of donor-derived cell-free DNA with risk for active rejection
•	0510U	Oncology (pancreatic cancer), augmentative algorithmic analysis of 16 genes from previously sequenced RNA whole-transcriptome data, reported as probability of predicted molecular subtype
•	0511U	Oncology (solid tumor), tumor cell culture in 3D microenvironment, 36 or more drug panel, reported as tumor-response prediction for each drug
•	0512U	Oncology (prostate), augmentative algorithmic analysis of digitized whole-slide imaging of histologic features for microsatellite instability (MSI) status, formalin-fixed paraffin-embedded (FFPE) tissue, reported as increased or decreased probability of MSI-high (MSI-H)
•	0513U	Oncology (prostate), augmentative algorithmic analysis of digitized whole-slide imaging histologic features for microsatellite instability (MSI) and homologous recombination deficiency (HRD) status, formalin-fixed paraffin-embedded (FFPE) tissue, reported as increased or decreased probability of each biomarker
•	0514U	Gastroenterology (irritable bowel disease [IBD]), immunoassay for quantitative determination of adalimumab (ADL) levels in venous serum in patients undergoing adalimumab therapy, results reported as a numerical value as micrograms per milliliter ( $\mu$ g/mL)
•	0515U	Gastroenterology (irritable bowel disease [IBD]), immunoassay for quantitative determination of infliximab (IFX) levels in venous serum in patients undergoing infliximab therapy, results reported as a numerical value as micrograms per milliliter ( $\mu$ g/mL)
•	0516U	Drug metabolism, whole blood, pharmacogenomic genotyping of 40 genes and CYP2D6 copy number variant analysis, reported as metabolizer status
•	0517U	Therapeutic drug monitoring, 80 or more psychoactive drugs or substances, LC-MS/MS, plasma, qualitative and quantitative therapeutic minimally and maximally effective dose of prescribed and non-prescribed medications
•	0518U	Therapeutic drug monitoring, 90 or more pain and mental health drugs or substances, LC MS/MS, plasma, qualitative and quantitative therapeutic minimally effective range of prescribed and non-prescribed medications



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# Pathology and Laboratory (14)

Symbols	Codes	Code Description
•	0519U	Therapeutic drug monitoring, medications specific to pain, depression, and anxiety, LC-MS/MS, plasma, 110 or more drugs or substances, qualitative and quantitative therapeutic minimally effective range of prescribed, non-prescribed, and illicit medications in circulation
•	0520U	Therapeutic drug monitoring, 200 or more drugs or substances, LC-MS/MS, plasma, qualitative and quantitative therapeutic minimally effective range of prescribed and non-prescribed medications
•	0521U	Rheumatoid factor IgA and IgM, cyclic citrullinated peptide (CCP) antibodies, and scavenger receptor A (SR-A) by immunoassay, blood
•	0522U	Carbonic anhydrase VI, parotid specific/secretory protein and salivary protein 1 (SPL), IgG, IgM, and IgA antibodies, chemiluminescence, semiquantitative, blood
•	0523U	Oncology (solid tumor), DNA, qualitative, next-generation sequencing (NGS) of single nucleotide variants (SNV) and insertion/deletions in 22 genes utilizing formalin-fixed paraffin embedded tissue, reported as presence or absence of mutation(s), location of mutation(s), nucleotide change, and amino acid change
•	0524U	Obstetrics (preeclampsia), sFlt-1/PIGF ratio, immunoassay, utilizing serum or plasma, reported as a value
•	0525U	Oncology, spheroid cell culture, 11-drug panel (carboplatin, docetaxel, doxorubicin, etoposide, gemcitabine, niraparib, olaparib, paclitaxel, rucaparib, topotecan, veliparib) ovarian, fallopian, or peritoneal response prediction for each drug
•	0526U	Nephrology (renal transplant), quantification of CXCL10 chemokines, flow cytometry, urine, reported as pg/ml creatinine baseline and monitoring over time
•	0527U	Herpes simplex virus (HSV) types 1 and 2 and Varicella zoster virus (VZV), amplified probe technique, each pathogen reported as detected or not detected
•	0528U	Lower respiratory tract infectious agent detection, 18 bacteria, 8 viruses, and 7 antimicrobial resistance genes, amplified probe technique, including reverse transcription for RNA targets, each analyte reported as detected or not detected with semiquantitative results for 15 bacteria
•	0529U	Hematology (venous thromboembolism [VTE]), genome-wide single-nucleotide polymorphism variants, including F2 and FS gene analysis, and Leiden variant, by microarray analysis, saliva, report as risk score for VTE
•	0530U	Oncology (pan-solid tumor), ctDNA, utilizing plasma, next-generation sequencing (NGS) of 77 genes, 8 fusions, microsatellite instability, and tumor mutation burden, interpretative report for single-nucleotide variants, copy-number alterations, with therapy association



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# Updates to Medicine

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In 2025, the Medicine section of the Current Procedural Terminology (CPT) code set underwent significant updates to reflect advancements in medical practice and technology.

## 2025 Medicine CPT Updates Overview

- New codes for advanced diagnostic and therapeutic procedures.
- Enhancements in AI-assisted medical analysis and imaging.
- Updates to immunization, injections, and medication administration.
- Refinements to improve accuracy and alignment with modern medical practices.



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# Medicine

Symbols	Codes	Code Description
• #	90624	Meningococcal pentavalent vaccine, Men B-4C recombinant proteins and outer membrane vesicle and conjugated Men A, C, W, Y-diphtheria toxoid carrier, for intramuscular use
	90630	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, for intradermal use
• #	90637	Influenza virus vaccine, quadrivalent (qIRV), mRNA; 30 mcg/0.5 ml dosage, for intramuscular use
• #	90638	Influenza virus vaccine, quadrivalent (qIRV), mRNA; 60 mcg/0.5 ml dosage, for intramuscular use
• #	90593	Chikungunya virus vaccine, recombinant, for intramuscular use
	90654	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, for intradermal use
▲	90661	Influenza virus vaccine, trivalent (cc1IV3), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use
• #	90684	Pneumococcal conjugate vaccine, 21 valent (PCV21), for intramuscular use
•	90695	Influenza virus vaccine, H5N8, derived from cell cultures, adjuvanted, for intramuscular use
▲	92132	Scanning computerized ophthalmic diagnostic imaging (e.g., optical coherence tomography [OCT]), anterior segment, with interpretation and report, unilateral or bilateral
▲	92133	Scanning computerized ophthalmic diagnostic imaging (e.g., optical coherence tomography [OCT]), posterior segment, with interpretation and report, unilateral or bilateral; optic nerve
▲	92134	Scanning computerized ophthalmic diagnostic imaging (e.g., optical coherence tomography [OCT]), posterior segment, with interpretation and report, unilateral or bilateral; retina
•	92137	Computerized ophthalmic diagnostic imaging (eg, optical coherence tomography [OCT]), posterior segment, with interpretation and report, unilateral or bilateral; retina, including OCT angiography



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# Medicine (1)

Symbols	Codes	Code Description
▲	93656	Comprehensive electrophysiologic evaluation <u>including</u> <u>with</u> transseptal catheterizations, insertion and repositioning of multiple electrode catheters. <u>induction</u> <u>or attempted induction of an arrhythmia including left or right atrial pacing/recording, with and</u> intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including intracardiac electrophysiologic 3-dimensional mapping, intracardiac echocardiography <u>including</u> <u>with</u> imaging supervision and interpretation, <u>induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, right ventricular pacing/recording, and His bundle recording, when performed</u>
	93890	Transcranial Doppler study of the intracranial arteries; vasoreactivity study
▲	93893	Transcranial Doppler study of the intracranial arteries; <u>emboli-venous-arterial shunt</u> detection with intravenous microbubble injection
#+•	93896	Vasoreactivity study performed with transcranial Doppler study of intracranial arteries, complete (List separately in addition to code for primary procedure)
#+•	93897	Emboli detection without intravenous microbubble injection performed with transcranial Doppler study of intracranial arteries, complete (List separately in addition to code for primary procedure)
#+•	93898	Vasoreactivity study performed with transcranial Doppler study of intracranial arteries, complete (List separately in addition to code for primary procedure)
	96003	Dynamic fine wire electromyography, <u>during walking or other functional activities, 1 muscle</u>
	96040	Medical genetics and genetic counseling services, each 30 minutes face to face with patient/family
★▣●	96041	Medical genetics and genetic counseling services, each 30 minutes of total time provided by the genetic counselor on the date of the encounter
•#	96380	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection, with counseling by physician or other qualified health care professional
•#	96381	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection
# ▲	97811	Acupuncture, 1 or more needles; without electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with <u>re</u> insertion of needle{s} (List separately in addition to code for primary procedure)
# ▲	97814	Acupuncture, 1 or more needles; with electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with <u>re</u> insertion of needle{s} (List separately in addition to code for primary procedure)



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# Updates to Category III Codes

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In 2025, the Category III section of the Current Procedural Terminology (CPT) code set saw significant updates, reflecting the rapid evolution of medical technology and procedures. Here are the key takeaways

## 2025 Category III CPT Updates Overview

- New codes added for emerging medical technologies and procedures.
- Advancements in AI-assisted diagnostics and imaging.
- Expanded coding for innovative cardiac, surgical, and monitoring techniques.
- Refinements and deletions to streamline coding and improve accuracy.



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# Category III Codes

Symbols	Codes	Code Description
	0398T	Magnetic resonance image guided high intensity focused ultrasound (MRgFUS), stereotactic ablation lesion, intracranial for movement disorder including stereotactic navigation and frame placement when performed
	0500T	Infectious agent detection by nucleic acid (DNA or RNA), Human Papillomavirus (HPV) for five or more separately reported high-risk HPV types (e.g., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) (i.e., genotyping)
	0537T	Chimeric antigen receptor T-cell (CAR-T) therapy; harvesting of blood-derived T lymphocytes for development of genetically modified autologous CAR-T cells, per day
	0538T	Chimeric antigen receptor T-cell (CAR-T) therapy; preparation of blood-derived T lymphocytes for transportation (eg, cryopreservation, storage)
	0539T	Chimeric antigen receptor T-cell (CAR-T) therapy; receipt and preparation of CAR-T cells for administration
	0540T	Chimeric antigen receptor T-cell (CAR-T) therapy; CAR-T cell administration, autologous
	0553T	Percutaneous transcatheter placement of iliac arteriovenous anastomosis implant, inclusive of all radiological supervision and interpretation, intraprocedural road mapping, and imaging guidance necessary to complete the intervention
	0564T	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on percent of cytotoxicity observed, a minimum of 14 drugs or drug combinations
	0567T	Permanent fallopian tube occlusion with degradable biopolymer implant, transcervical approach, including transvaginal ultrasound
	0568T	Introduction of mixture of saline and air for sonosalpingography to confirm occlusion of fallopian tubes, transcervical approach, including transvaginal ultrasound and pelvic ultrasound
▲	0615T	Automated Eye movement analysis of binocular eye movements without spatial calibration, including disconjugacy, saccades, and pupillary dynamics for the assessment of concussion, with interpretation and report
	0616T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; without removal of crystalline lens or intraocular lens, without insertion of intraocular lens
	0617T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with removal of crystalline lens and insertion of intraocular lens



## Category III Codes (1)

Symbols	Codes	Code Description
	0618T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with secondary intraocular lens placement or intraocular lens exchange
	0714T	Trans perineal laser ablation of benign prostatic hyperplasia, including imaging guidance; <u>prostate volume less than 50 mL</u>
•	0867T	Trans perineal laser ablation of benign prostatic hyperplasia, including imaging guidance; prostate volume greater or equal to 50 mL
•	0868T	High-resolution gastric electrophysiology mapping with simultaneous patient-symptom profiling, with interpretation and report
•	0869T	Injection(s), bone-substitute material for bone and/or soft tissue hardware fixation augmentation, including intraoperative imaging guidance, when performed
•	0870T	Implantation of subcutaneous peritoneal ascites pump system, percutaneous, including pump-pocket creation, insertion of tunneled indwelling bladder and peritoneal catheters with pump connections, including all imaging and initial programming, when performed
•	0871T	Replacement of a subcutaneous peritoneal ascites pump, including reconnection between pump and indwelling bladder and peritoneal catheters, including initial programming and imaging, when performed
•	0872T	Replacement of indwelling bladder and peritoneal catheters, including tunneling of catheter(s) and connection with previously implanted peritoneal ascites pump, including imaging and programming, when performed
•	0873T	Revision of a subcutaneously implanted peritoneal ascites pump system, any component (ascites pump, associated peritoneal catheter, associated bladder catheter), including imaging and programming, when performed
•	0874T	Removal of a peritoneal ascites pump system, including implanted peritoneal ascites pump and indwelling bladder and peritoneal catheters
•	0875T	Programming of subcutaneously implanted peritoneal ascites pump system by physician or other qualified health care professional



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## Category III Codes (2)

Symbols	Codes	Code Description
•	0876T	Duplex scan of hemodialysis fistula, computer-aided, limited (volume flow, diameter, and depth, including only body of fistula)
•	0877T	Augmentative analysis of chest computed tomography (CT) imaging data to provide categorical diagnostic subtype classification of interstitial lung disease; obtained without concurrent CT examination of any structure contained in previously acquired diagnostic imaging
•	0878T	Augmentative analysis of chest computed tomography (CT) imaging data to provide categorical diagnostic subtype classification of interstitial lung disease; obtained with concurrent CT examination of the same structure
•	0879T	Augmentative analysis of chest computed tomography (CT) imaging data to provide categorical diagnostic subtype classification of interstitial lung disease; radiological data preparation and transmission
•	0880T	Augmentative analysis of chest computed tomography (CT) imaging data to provide categorical diagnostic subtype classification of interstitial lung disease; physician or other qualified health care professional interpretation and report
•	0881T	Cryotherapy of the oral cavity using temperature regulated fluid cooling system, including placement of an oral device, monitoring of patient tolerance to treatment, and removal of the oral device
+•	0882T	Intraoperative therapeutic electrical stimulation of peripheral nerve to promote nerve regeneration, including lead placement and removal, upper extremity, minimum of 10 minutes; initial nerve (List separately in addition to code for primary procedure)
+•	0883T	Intraoperative therapeutic electrical stimulation of peripheral nerve to promote nerve regeneration, including lead placement and removal, upper extremity, minimum of 10 minutes; each additional nerve (List separately in addition to code for primary procedure)
•	0884T	Esophagoscopy, flexible, transoral, with initial transendoscopic mechanical dilation (eg, nondrug-coated balloon) followed by therapeutic drug delivery by drug-coated balloon catheter for esophageal stricture, including fluoroscopic guidance, when performed
•	0885T	Colonoscopy, flexible, with initial transendoscopic mechanical dilation (eg, nondrug-coated balloon) followed by therapeutic drug delivery by drug-coated balloon catheter for colonic stricture, including fluoroscopic guidance, when performed
•	0886T	Sigmoidoscopy, flexible, with initial transendoscopic mechanical dilation (eg, nondrug coated balloon) followed by therapeutic drug delivery by drug-coated balloon catheter for colonic stricture, including fluoroscopic guidance, when performed
+•	0887T	End-tidal control of inhaled anesthetic agents and oxygen to assist anesthesia care delivery (List separately in addition to code for primary procedure)



## Category III Codes (3)

Symbols	Codes	Code Description
•	0888T	Histotripsy (i.e., non-thermal ablation via acoustic energy delivery) of malignant renal tissue, including imaging guidance
•	0889T	Personalized target development for accelerated, repetitive high-dose functional connectivity MRI-guided theta-burst stimulation derived from a structural and resting-state functional MRI, including data preparation and transmission, generation of the target, motor threshold-starting location, neuronavigational files and target report, review and interpretation
•	0890T	Accelerated, repetitive high-dose functional connectivity MRI-guided theta-burst stimulation, including target assessment, initial motor threshold determination, neuronavigational, delivery and management, initial treatment day
•	0891T	Accelerated, repetitive high-dose functional connectivity MRI-guided theta-burst stimulation, including neuron avigation, delivery and management, subsequent treatment day
•	0892T	Accelerated, repetitive high-dose functional connectivity MRI-guided theta-burst stimulation, including neuron avigation, delivery and management, subsequent motor threshold redetermination with delivery and management, per treatment day
•	0893T	Noninvasive assessment of blood oxygenation, gas exchange efficiency, and cardiorespiratory status, with physician or other qualified health care professional interpretation and report
•	0894T	Cannulation of the liver allograft in preparation for connection to the normothermic perfusion device and decannulation of the liver allograft following normothermic perfusion
•	0895T	Connection of liver allograft to normothermic machine perfusion device, hemostasis control; initial 4 hours of monitoring time, including hourly physiological and laboratory assessments (e.g., perfusate temperature, perfusate pH, hemodynamic parameters, bile production, bile pH, bile glucose, biliary bicarbonate, lactate levels, macroscopic assessment)
+•	0896T	Connection of liver allograft to normothermic machine perfusion device, hemostasis control; each additional hour, including physiological and laboratory assessments (e.g., perfusate temperature, perfusate pH, hemodynamic parameters, bile production, bile pH, bile glucose, biliary bicarbonate, lactate levels, macroscopic assessment) (List separately in addition to code for primary procedure)
•	0897T	Noninvasive augmentative arrhythmia analysis derived from quantitative computational cardiac arrhythmia simulations, based on selected intervals of interest from 12-lead electrocardiogram and uploaded clinical parameters, including uploading clinical parameters with interpretation and report
•	0898T	Noninvasive prostate cancer estimation map, derived from augmentative analysis of image guided fusion biopsy and pathology, including visualization of margin volume and location, with margin determination and physician interpretation and report



## Category III Codes (4)

Symbols	Codes	Code Description
+ •	0899T	Noninvasive estimate of absolute quantitation of myocardial blood flow (AQMBF), derived from assistive algorithmic analysis of the dataset acquired via contrast cardiac magnetic resonance (CMR), pharmacologic stress, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)
+ •	0900T	Placement of bone marrow sampling port, including imaging guidance when performed
•	0901T	QTc interval derived by augmentative algorithmic analysis of input from an external, patient activated mobile ECG device
•	0902T	Electrocardiogram, algorithmically generated 12-lead ECG from a reduced-lead ECG; with interpretation and report
•	0903T	Noninvasive estimate of absolute quantitation of myocardial blood flow (AQMBF), derived from assistive algorithmic analysis of the dataset acquired via contrast cardiac magnetic resonance (CMR), pharmacologic stress, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)
•	0899T	Noninvasive determination of absolute quantitation of myocardial blood flow (AQMBF), derived from augmentative algorithmic analysis of the dataset acquired via contrast cardiac magnetic resonance (CMR), pharmacologic stress, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)
•	0900T	Noninvasive estimate of absolute quantitation of myocardial blood flow (AQMBF), derived from assistive algorithmic analysis of the dataset acquired via contrast cardiac magnetic resonance (CMR), pharmacologic stress, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)
•	0901T	Placement of bone marrow sampling port, including imaging guidance when performed
•	0902T	QTc interval derived by augmentative algorithmic analysis of input from an external, patient activated mobile ECG device
•	0903T	Electrocardiogram, algorithmically generated 12-lead ECG from a reduced-lead ECG; with interpretation and report



## Category III Codes (5)

Symbols	Codes	Code Description
•	0904T	Electrocardiogram, algorithmically generated 12-lead ECG from a reduced-lead ECG; tracing only
•	0905T	Electrocardiogram, algorithmically generated 12-lead ECG from a reduced-lead ECG; interpretation and report only
•	0906T	Concurrent optical and magnetic stimulation (COMS) therapy, wound assessment and dressing care; first application, total wound(s) surface area less than or equal to 50 sq cm



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## Category III Codes (6)

Symbols	Codes	Code Description
+•	0907T	Concurrent optical and magnetic stimulation (COMS) therapy, wound assessment and dressing care; each additional application, total wound(s) surface area less than or equal to 50 sq cm (List separately in addition to code for primary procedure)
•	0908T	Open implantation of integrated neurostimulation system, vagus nerve, including analysis and programming, when performed
•	0909T	Replacement of integrated neurostimulation system, vagus nerve, including analysis and programming, when performed
•	0910T	Removal of integrated neurostimulation system, vagus nerve
•	0911T	Electronic analysis of implanted integrated neurostimulation system, vagus nerve; without programming by physician or other qualified health care professional
•	0912T	Electronic analysis of implanted integrated neurostimulation system, vagus nerve; with simple programming by physician or other qualified health care professional
•	0913T	Percutaneous transcatheter therapeutic drug delivery by intracoronary drug-delivery balloon (e.g., drug-coated, drug-eluting), including mechanical dilation by nondrug-delivery balloon angioplasty, endoluminal imaging using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) when performed, imaging supervision, interpretation, and report, single major coronary artery or branch
+•	0914T	Percutaneous transcatheter therapeutic drug delivery by intracoronary drug-delivery balloon (e.g., drug-coated, drug-eluting) performed on a separate target lesion from the target lesion treated with balloon angioplasty, coronary stent placement or coronary atherectomy, including mechanical dilation by nondrug-delivery balloon angioplasty, endoluminal imaging using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) when performed, imaging supervision, interpretation, and report, single major coronary artery or branch (List separately in addition to code for percutaneous coronary stent or atherectomy intervention)
•	0915T	Insertion of permanent cardiac contractility modulation-defibrillation system component(s), including fluoroscopic guidance, and evaluation and programming of sensing and therapeutic parameters; pulse generator and dual transvenous electrodes/leads (pacing and defibrillation)
•	0916T	Insertion of permanent cardiac contractility modulation-defibrillation system component(s), including fluoroscopic guidance, and evaluation and programming of sensing and therapeutic parameters; pulse generator only



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## Category III Codes (7)

Symbols	Codes	Code Description
•	0917T	Insertion of permanent cardiac contractility modulation-defibrillation system component(s), including fluoroscopic guidance, and evaluation and programming of sensing and therapeutic parameters; single transvenous lead (pacing or defibrillation) only
•	0918T	Insertion of permanent cardiac contractility modulation-defibrillation system component(s), including fluoroscopic guidance, and evaluation and programming of sensing and therapeutic parameters; dual transvenous leads (pacing and defibrillation) only
•	0919T	Removal of a permanent cardiac contractility modulation-defibrillation system component(s); pulse generator only
•	0920T	Removal of a permanent cardiac contractility modulation-defibrillation system component(s); single transvenous pacing lead only
•	0921T	Removal of a permanent cardiac contractility modulation-defibrillation system component(s); single transvenous defibrillation lead only
•	0922T	Removal of a permanent cardiac contractility modulation-defibrillation system component(s); dual (pacing and defibrillation) transvenous leads only
•	0923T	Removal and replacement of permanent cardiac contractility modulation-defibrillation pulse generator only
•	0924T	Repositioning of previously implanted cardiac contractility modulation-defibrillation transvenous electrode(s)/lead(s), including fluoroscopic guidance and programming of sensing and therapeutic parameters
•	0925T	Relocation of skin pocket for implanted cardiac contractility modulation-defibrillation pulse generator
•	0926T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, including review and report, implantable cardiac contractility modulation defibrillation system



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## Category III Codes (8)

Symbols	Codes	Code Description
•	0927T	Interrogation device evaluation (in person) with analysis, review, and report, including connection, recording, and disconnection, per patient encounter, implantable cardiac contractility modulation-defibrillation system
•	0928T	Interrogation device evaluation (remote), up to 90 days, cardiac contractility modulation defibrillation system with interim analysis and report(s) by a physician or other qualified health care professional
•	0929T	Interrogation device evaluation (remote), up to 90 days, cardiac contractility modulation defibrillation system, remote data acquisition(s), receipt of transmissions, technician review, technical support, and distribution of results
•	0930T	Electrophysiologic evaluation of cardiac contractility modulation-defibrillator leads, including defibrillation-threshold evaluation (induction of arrhythmia, evaluation of sensing and therapy for arrhythmia termination), at time of initial implantation or replacement with testing of cardiac contractility modulation-defibrillator pulse generator
•	0931T	Electrophysiologic evaluation of cardiac contractility modulation-defibrillator leads, including defibrillation-threshold evaluation (induction of arrhythmia, evaluation of sensing and therapy for arrhythmia termination), separate from initial implantation or replacement with testing of cardiac contractility modulation-defibrillator pulse generator
•	0932T	Noninvasive detection of heart failure derived from augmentative analysis of an echocardiogram that demonstrated preserved ejection fraction, with interpretation and report by a physician or other qualified health care professional
•	0933T	Transcatheter implantation of wireless left atrial pressure sensor for long-term left atrial pressure monitoring, including sensor calibration and deployment, right heart catheterization, transseptal puncture, imaging guidance, and radiological supervision and interpretation
•	0934T	Remote monitoring of a wireless left atrial pressure sensor for up to 30 days, including data from daily uploads of left atrial pressure recordings, interpretation(s) and trend analysis, with adjustments to the diuretics plan, treatment paradigm thresholds, medications or lifestyle modifications, when performed, and report(s) by a physician or other qualified health care professional
•	0935T	Cystourethroscopy with renal pelvic sympathetic denervation, radiofrequency ablation, retrograde ureteral approach, including insertion of guide wire, selective placement of ureteral sheath(s) and multiple conformable electrodes, contrast injection(s), and fluoroscopy, bilateral
•	0936T	Photo biomodulation therapy of retina, single session
•	0937T	External electrocardiographic recording for greater than 15 days up to 30 days by continuous rhythm recording and storage; including recording, scanning analysis with report, review and interpretation by a physician or other qualified health care professional



## Category III Codes (9)

Symbols	Codes	Code Description
•	0938T	External electrocardiographic recording for greater than 15 days up to 30 days by continuous rhythm recording and storage; recording (including connection and initial recording)
•	0939T	External electrocardiographic recording for greater than 15 days up to 30 days by continuous rhythm recording and storage; scanning analysis with report
•	0940T	External electrocardiographic recording for greater than 15 days up to 30 days by continuous rhythm recording and storage; review and interpretation by a physician or other qualified health care professional
•	0941T	Cystourethroscopy, flexible; with insertion and expansion of prostatic urethral scaffold using integrated cryptoscopic visualization
•	0942T	Cystourethroscopy, flexible; with removal and replacement of prostatic urethral scaffold
•	0943T	Cystourethroscopy, flexible; with removal of prostatic urethral scaffold
•	0944T	3D contour simulation of target liver lesion(s) and margin(s) for image-guided percutaneous microwave ablation
+•	0945T	intraoperative assessment for abnormal (tumor) tissue, in-vivo, following partial mastectomy (e.g., lumpectomy) using computer-aided fluorescence imaging (List separately in addition to code for primary procedure)
•	0946T	Orthopedic implant movement analysis using paired computed tomography (CT) examination of the target structure, including data acquisition, data preparation and transmission, interpretation and report (including CT scan of the joint or extremity performed with paired views)
•	0947T	Magnetic resonance image guided low intensity focused ultrasound (MRgFUS), stereotactic blood-brain barrier disruption using microbubble resonators to increase the concentration of blood-based biomarkers of target, intracranial, including stereotactic navigation and frame placement, when performed



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# Administrative Multianalyte Assays with Algorithmic Analyses (MAM)

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- 0020M      Oncology (central nervous system), analysis of 30000 DNA methylation loci by methylation array, utilizing DNA extracted from tumor tissue, diagnostic algorithm reported as probability of matching a reference tumor subclass



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