Molina Clinical Policy
Category III CPT Codes
Policy No. 321

Last Approval: 12/10/2025
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DISCLAIMER

This Molina Clinical Policy (MCP) is intended to facilitate the Utilization Management process. Policies are not a supplementation or recommendation for treatment; Providers are solely responsible for the diagnosis, treatment, and clinical recommendations for the Member. It expresses Molina's determination as to whether certain services or supplies are medically necessary, experimental, investigational, or cosmetic for purposes of determining appropriateness of payment. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered (e.g., will be paid for by Molina) for a particular Member. The Member's benefit plan determines coverage – each benefit plan defines which services are covered, which are excluded, and which are subject to dollar caps or other limits. Members and their Providers will need to consult the Member's benefit plan to determine if there are any exclusion(s) or other benefit limitations applicable to this service or supply. If there is a discrepancy between this policy and a Member's plan of benefits, the benefits plan will govern. In addition, coverage may be mandated by applicable legal requirements of a State, the Federal government or CMS for Medicare and Medicaid Members. CMS's Coverage Database can be found on the CMS website. The coverage directive(s) and criteria from an existing National Coverage Determination (NCD) or Local Coverage Determination (LCD) will supersede the contents of this MCP and provide the directive for all Medicare members. References included were accurate at the time of policy approval and publication.

OVERVIEW

Current Procedural Terminology (CPT) Category III codes are developed by the American Medical Association (AMA) and are defined as a set of temporary codes for emerging technology, services, procedures, and service paradigms. Category III codes enable the collection of data for these services or procedures. If a Category III code is available, this code must be reported rather than a Category I unlisted code. The use of these codes allows physicians and other qualified health care professionals, insurers, health services researchers, and health policy experts to identify emerging technology, services, procedures, and service paradigms for clinical efficacy, utilization, and outcomes.

The inclusion of a service or procedure as a Category III code does not constitute a finding of support, or lack thereof, regarding clinical efficacy, safety, applicability to clinical practice, or payer coverage. These codes may not conform to the usual requirements for CPT Category I codes established by the AMA. For Category I codes, the AMA requires that the service/procedure be performed by many health care professionals in clinical practice in multiple locations and that FDA approval, as appropriate, has already been received. The nature of emerging technology, services, procedures, and service paradigms is such that these requirements may not be met. For these reasons, temporary codes for emerging technology, services, procedures, and service paradigms have been placed in a separate section of the CPT code set, and the codes are differentiated from Category I CPT codes using alphanumeric characters (e.g., four digits followed by the letter T).

Section 1862(a)(1)(A) of the Social Security Act (SSA) (AMA 2023) is the statutory basis for denying payment for types of care, items, services, and procedures, not excluded by any other statutory clause while meeting all technical requirements for coverage, that are determined to be any of the following:

- Not generally accepted by the medical community as safe and effective in the setting and for the condition for which it is used
- Not proven safe and effective based on peer review or scientific literature
- Experimental
- Not medically necessary for a particular patient
- Furnished at a level, duration, or frequency that is not medically appropriate
- Not furnished in accordance with accepted standards of medical practice
- Not furnished in a setting appropriate to the patient's medical needs and condition

Items and services must be established as safe and effective to be considered medically necessary. That is, the items and services must be:

- Consistent with the symptoms of diagnosis of the illness or injury under treatment
- Necessary for, and consistent with, generally accepted professional medical standards of care (e.g., not
- experimental)
- Not furnished primarily for the convenience of the patient or of the provider or supplier
- Furnished at the most appropriate level of care that can be provided safely and effectively to the patient

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Medical devices that are not approved for marketing by the Food and Drug Administration (FDA) are considered investigational by Medicare and are not considered reasonable and necessary for the diagnosis or treatment of illness or injury, or to improve the functioning of a malformed body member. Program payment, therefore, may not be made for medical procedures and services performed using devices that have not been approved for marketing by the FDA or for those not included in an FDA-approved investigational device exemption (IDE) trial.

COVERAGE POLICY

Molina Healthcare considers all services and procedures listed in the current and future Category III CPT code list as **experimental, investigational, and unproven*** except when there is a specific Centers for Medicare and Medicaid Services (CMS) National or Local Coverage Determination (NCD or LCD), state guidance, Molina Clinical Policy, or an MCG Guideline that addresses medically necessary indications for the specific category III CPT code.

**Reference MCP-184 Experimental and Investigational Services for definition of experimental, investigational, and unproven services.*

DOCUMENTATION REQUIREMENTS. Molina Healthcare reserves the right to require that additional documentation be made available as part of its coverage determination; quality improvement; and fraud; waste and abuse prevention processes. Documentation required may include, but is not limited to, patient records, test results and credentials of the provider ordering or performing a drug or service. Molina Healthcare may deny reimbursement or take additional appropriate action if the documentation provided does not support the initial determination that the drugs or services were medically necessary, not investigational, or experimental, and otherwise within the scope of benefits afforded to the member, and/or the documentation demonstrates a pattern of billing or other practice that is inappropriate or excessive.

SUMMARY OF MEDICAL EVIDENCE

There are no published guidelines or recommendations by national/professional societies and organizations.

CODING & BILLING INFORMATION

CPT (Current Procedural Terminology)

Code	Code Description
0901T	Placement of bone marrow sampling port, including imaging guidance when performed
0948T	Interrogation device evaluation (remote), up to 90 days, cardiac contractility modulation system with interim analysis, review and report(s) by a physician or other qualified health care professional
0949T	Interrogation device evaluation (remote), up to 90 days, cardiac contractility modulation system, remote data acquisition(s), receipt of transmissions, technician review, technical support, and distribution of results
0602T	Glomerular filtration rate (GFR) measurement(s), transdermal, including sensor placement and administration of a single dose of fluorescent pyrazine agent
0603T	Glomerular filtration rate (GFR) monitoring, transdermal, including sensor placement and administration of more than one dose of fluorescent pyrazine agent, each 24 hours
0633T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast material
0634T	Computed tomography, breast, including 3D rendering, when performed, unilateral; with contrast material(s)
0635T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast, followed by contrast material(s)
0636T	Computed tomography, breast, including 3D rendering, when performed, bilateral; without contrast material(s)
0637T	Computed tomography, breast, including 3D rendering, when performed, bilateral; with contrast material(s)
0638T	Computed tomography, breast, including 3D rendering, when performed, bilateral; without contrast, followed by contrast material(s)
0639T	Wireless skin sensor thermal anisotropy measurement(s) and assessment of flow in cerebrospinal fluid shunt, including ultrasound guidance, when performed
0859T	Noncontact near-infrared spectroscopy (e.g., for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), other than for screening for peripheral arterial disease, image acquisition, interpretation, and report; each additional anatomic site (List separately in addition to code for primary procedure)
0860T	Noncontact near-infrared spectroscopy (e.g., for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), for screening for peripheral arterial disease, including provocative maneuvers, image acquisition, interpretation, and report, one or both lower extremities
0658T	Electrical impedance spectroscopy of 1 or more skin lesions for automated melanoma risk score

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0664T	Donor hysterectomy (including cold preservation); open, from cadaver donor
0668T	Backbench standard preparation of cadaver or living donor uterine allograft prior to transplantation, including dissection and removal of surrounding soft tissues and preparation of uterine vein(s) and uterine artery(ies), as necessary
0669T	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; venous anastomosis, each
0670T	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; arterial anastomosis, each
0684T	Peri-procedural device evaluation (in-person) and programming of device system parameters before or after a surgery, procedure, or test with analysis, review, and report by a physician or other qualified health care professional, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function
0691T	Automated analysis of an existing computed tomography study for vertebral fracture(s), including assessment of bone density when performed, data preparation, interpretation, and report
0692T	Therapeutic ultrafiltration
0693T	Comprehensive full body computer-based markerless 3D kinematic and kinetic motion analysis and report
0699T	Injection, posterior chamber of eye, medication
0700T	Molecular fluorescent imaging of suspicious nevus; first lesion
0701T	Molecular fluorescent imaging of suspicious nevus; each additional lesion (List separately in addition to code for primary procedure)
0708T	Intradermal cancer immunotherapy; preparation and initial injection
0709T	Intradermal cancer immunotherapy; each additional injection (List separately in addition to code for primary procedure)
0950T	Ablation of benign prostate tissue, transrectal, with high intensity-focused ultrasound (HIFU), including ultrasound guidance
0716T	Cardiac acoustic waveform recording with automated analysis and generation of coronary artery disease risk score
0721T	Quantitative computed tomography (CT) tissue characterization, including interpretation and report, obtained without concurrent CT examination of any structure contained in previously acquired diagnostic imaging
0728T	Diagnostic analysis of vestibular implant, unilateral; with initial programming
0729T	Diagnostic analysis of vestibular implant, unilateral; with subsequent programming
0731T	Augmentative AI-based facial phenotype analysis with report
0732T	Immunotherapy administration with electroporation, intramuscular
0735T	Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with primary craniotomy (List separately in addition to code for primary procedure)
0736T	Colonic lavage, 35 or more liters of water, gravity-fed, with induced defecation, including insertion of rectal catheter
0738T	Treatment planning for magnetic field induction ablation of malignant prostate tissue, using data from previously performed magnetic resonance imaging (MRI) examination
0749T	Bone strength and fracture-risk assessment using digital X-ray radiogrammetry-bone mineral density (DXR-BMD) analysis of bone mineral density (BMD) utilizing data from a digital X ray, retrieval and transmission of digital X-ray data, assessment of bone strength and fracture risk and BMD, interpretation and report;
0750T	Bone strength and fracture-risk assessment using digital X-ray radiogrammetry-bone mineral density (DXR-BMD) analysis of bone mineral density (BMD) utilizing data from a digital X ray, retrieval and transmission of digital X-ray data, assessment of bone strength and fracture risk and BMD, interpretation and report; with single-view digital X-ray examination of the hand taken for the purpose of DXR-BMD
0751T	Digitization of glass microscope slides for level II, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)
0752T	Digitization of glass microscope slides for level III, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)
0753T	Digitization of glass microscope slides for level IV, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)
0754T	Digitization of glass microscope slides for level V, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)
0755T	Digitization of glass microscope slides for level VI, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)
0756T	Digitization of glass microscope slides for special stain, including interpretation and report, group I, for microorganisms (e.g., acid fast, methenamine silver) (List separately in addition to code for primary procedure)
0757T	Digitization of glass microscope slides for special stain, including interpretation and report, group II, all other (e.g., iron, trichrome), except stain for microorganisms, stains for enzyme constituents, or immunocytochemistry and immunohistochemistry (List separately in addition to code for primary procedure)
0758T	Digitization of glass microscope slides for special stain, including interpretation and report, histochemical stain on frozen tissue block (List separately in addition to code for primary procedure)
0759T	Digitization of glass microscope slides for special stain, including interpretation and report, group III, for enzyme constituents (List separately in addition to code for primary procedure)

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0760T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, initial single antibody stain procedure (List separately in addition to code for primary procedure)
0761T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each additional single antibody stain procedure (List separately in addition to code for primary procedure)
0762T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each multiplex antibody stain procedure (List separately in addition to code for primary procedure)
0763T	Digitization of glass microscope slides for morphometric analysis, tumor immunohistochemistry (e.g., Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure, manual (List separately in addition to code for primary procedure)
0827T	Digitization of glass microscope slides for cytopathology, fluids, washings, or brushings, except cervical or vaginal; smears with interpretation (List separately in addition to code for primary procedure)
0828T	Digitization of glass microscope slides for cytopathology, fluids, washings, or brushings, except cervical or vaginal; simple filter method with interpretation (List separately in addition to code for primary procedure)
0829T	Digitization of glass microscope slides for cytopathology, concentration technique, smears, and interpretation (e.g., Saccomanno technique) (List separately in addition to code for primary procedure)
0830T	Digitization of glass microscope slides for cytopathology, selective-cellular enhancement technique with interpretation (e.g., liquid-based slide preparation method), except cervical or vaginal (List separately in addition to code for primary procedure)
0831T	Digitization of glass microscope slides for cytopathology, cervical or vaginal (any reporting system), requiring interpretation by physician (List separately in addition to code for primary procedure)
0832T	Digitization of glass microscope slides for cytopathology, smears, any other source; screening and interpretation (List separately in addition to code for primary procedure)
0833T	Digitization of glass microscope slides for cytopathology, smears, any other source; preparation, screening and interpretation (List separately in addition to code for primary procedure)
0834T	Digitization of glass microscope slides for cytopathology, smears, any other source; extended study involving over 5 slides and/or multiple stains (List separately in addition to code for primary procedure)
0835T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, first evaluation episode, each site (List separately in addition to code for primary procedure)
0836T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, each separate additional evaluation episode, same site (List separately in addition to code for primary procedure)
0837T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; interpretation and report (List separately in addition to code for primary procedure)
0838T	Digitization of glass microscope slides for consultation and report on referred slides prepared elsewhere (List separately in addition to code for primary procedure)
0839T	Digitization of glass microscope slides for consultation and report on referred material requiring preparation of slides (List separately in addition to code for primary procedure)
0840T	Digitization of glass microscope slides for consultation, comprehensive, with review of records and specimens, with report on referred material (List separately in addition to code for primary procedure)
0841T	Digitization of glass microscope slides for pathology consultation during surgery; first tissue block, with frozen section(s), single specimen (List separately in addition to code for primary procedure)
0842T	Digitization of glass microscope slides for pathology consultation during surgery; each additional tissue block with frozen section(s) (List separately in addition to code for primary procedure)
0843T	Digitization of glass microscope slides for pathology consultation during surgery; cytologic examination (e.g., touch preparation, squash preparation), initial site (List separately in addition to code for primary procedure)
0844T	Digitization of glass microscope slides for pathology consultation during surgery; cytologic examination (e.g., touch preparation, squash preparation), each additional site (List separately in addition to code for primary procedure)
0845T	Digitization of glass microscope slides for immunofluorescence, per specimen; initial single antibody stain procedure (List separately in addition to code for primary procedure)
0846T	Digitization of glass microscope slides for immunofluorescence, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure)
0847T	Digitization of glass microscope slides for examination and selection of retrieved archival (i.e., previously diagnosed) tissue(s) for molecular analysis (e.g., KRAS mutational analysis) (List separately in addition to code for primary procedure)
0848T	Digitization of glass microscope slides for in situ hybridization (e.g., FISH), per specimen; initial single probe stain procedure (List separately in addition to code for primary procedure)
0849T	Digitization of glass microscope slides for in situ hybridization (e.g., FISH), per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)
0850T	Digitization of glass microscope slides for in situ hybridization (e.g., FISH), per specimen; each multiplex probe stain procedure (List separately in addition to code for primary procedure)

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0851T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; initial single probe stain procedure (List separately in addition to code for primary procedure)
0852T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)
0853T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; each multiplex probe stain procedure (List separately in addition to code for primary procedure)
0854T	Digitization of glass microscope slides for blood smear, peripheral, interpretation by physician with written report (List separately in addition to code for primary procedure)
0855T	Digitization of glass microscope slides for bone marrow, smear interpretation (List separately in addition to code for primary procedure)
0856T	Digitization of glass microscope slides for electron microscopy, diagnostic (List separately in addition to code for primary procedure)
0766T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, with identification and marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; first nerve
0767T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, with identification and marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; each additional nerve (List separately in addition to code for primary procedure)
0770T	Virtual reality technology to assist therapy (List separately in addition to code for primary procedure)
0771T	Virtual reality (VR) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; initial 15 minutes of intraservice time, patient age 5 years or older
0772T	Virtual reality (VR) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; each additional 15 minutes intraservice time (List separately in addition to code for primary service)
0773T	Virtual reality (VR) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports; initial 15 minutes of intraservice time, patient age 5 years or older
0774T	Virtual reality (VR) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports; each additional 15 minutes intraservice time (List separately in addition to code for primary service)
0776T	Therapeutic induction of intra-brain hypothermia, including placement of a mechanical temperature-controlled cooling device to the neck over carotids and head, including monitoring (e.g., vital signs and sport concussion assessment tool 5 [SCAT5]), 30 minutes of treatment
0777T	Real-time pressure-sensing epidural guidance system (List separately in addition to code for primary procedure)
0778T	Surface mechanomyography (sMMG) with concurrent application of inertial measurement unit (IMU) sensors for measurement of multi-joint range of motion, posture, gait, and muscle function
0780T	Instillation of fecal microbiota suspension via rectal enema into lower gastrointestinal tract
0791T	Motor-cognitive, semi-immersive virtual reality-facilitated gait training, each 15 minutes (List separately in addition to code for primary procedure)
0792T	Application of silver diamine fluoride 38%, by a physician or other qualified health care professional
0794T	Patient-specific, assistive, rules-based algorithm for ranking pharmaco-oncologic treatment options based on the patient's tumor-specific cancer marker information obtained from prior molecular pathology, immunohistochemical, or other pathology results which have been previously interpreted and reported separately
0807T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with previously acquired computed tomography (CT) images, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report
0808T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with computed tomography (CT) images taken for the purpose of pulmonary tissue ventilation analysis, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report
0815T	Ultrasound-based radiofrequency echographic multi-spectrometry (REMS), bone-density study and fracture-risk assessment, 1 or more sites, hips, pelvis, or spine

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0820T	Continuous in-person monitoring and intervention (e.g., psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; first physician or other qualified health care professional, each hour
0821T	Continuous in-person monitoring and intervention (e.g., psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; second physician or other qualified health care professional, concurrent with first physician or other qualified health care professional, each hour (List separately in addition to code for primary procedure)
0822T	Continuous in-person monitoring and intervention (e.g., psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; clinical staff under the direction of a physician or other qualified health care professional, concurrent with first physician or other qualified health care professional, each hour (List separately in addition to code for primary procedure)
0857T	Opto-acoustic imaging, breast, unilateral, including axilla when performed, real-time with image documentation, augmentative analysis and report (List separately in addition to code for primary procedure)
0858T	Externally applied transcranial magnetic stimulation with concomitant measurement of evoked cortical potentials with automated report
0865T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion identification, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the brain during the same session
0875T	Programming of subcutaneously implanted peritoneal ascites pump system by physician or other qualified health care professional
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)
0887T	End-tidal control of inhaled anesthetic agents and oxygen to assist anesthesia care delivery (List separately in addition to code for primary procedure)
0893T	Noninvasive assessment of blood oxygenation, gas exchange efficiency, and cardiorespiratory status, with physician or other qualified health care professional interpretation and report
0951T	Totally implantable active middle ear hearing implant; initial placement, including mastoidectomy, placement of and attachment to sound processor
0952T	Totally implantable active middle ear hearing implant; revision or replacement, with mastoidectomy and replacement of sound processor
0953T	Totally implantable active middle ear hearing implant; revision or replacement, without mastoidectomy and replacement of sound processor
0954T	Totally implantable active middle ear hearing implant; replacement of sound processor only, with attachment to existing transducers
0955T	Totally implantable active middle ear hearing implant; removal, including removal of sound processor and all implant components
0956T	Partial craniectomy, channel creation, and tunneling of electrode for sub-scalp implantation of an electrode array, receiver, and telemetry unit for continuous bilateral electroencephalography monitoring system, including imaging guidance
0957T	Revision of sub-scalp implanted electrode array, receiver, and telemetry unit for electrode, when required, including imaging guidance
0958T	Removal of sub-scalp implanted electrode array, receiver, and telemetry unit for continuous bilateral electroencephalography monitoring system, including imaging guidance
0959T	Removal or replacement of magnet from coil assembly that is connected to continuous bilateral electroencephalography monitoring system, including imaging guidance
0960T	Replacement of sub-scalp implanted electrode array, receiver, and telemetry unit with tunneling of electrode for continuous bilateral electroencephalography monitoring system, including imaging guidance
0961T	Shortwave infrared radiation imaging, surgical pathology specimen, to assist gross examination for lymph node localization in fibroadipose tissue, per specimen (List separately in addition to code for primary procedure)
0962T	Assistive algorithmic analysis of acoustic and electrocardiogram recording for detection of cardiac dysfunction (e.g., reduced ejection fraction, cardiac murmurs, atrial fibrillation), with review and interpretation by a physician or other qualified health care professional
0963T	Anoscopy with directed submucosal injection of bulking agent into anal canal
0964T	Impression and custom preparation of jaw expansion oral prosthesis for obstructive sleep apnea, including initial adjustment; single arch, without mandibular advancement mechanism
0965T	Impression and custom preparation of jaw expansion oral prosthesis for obstructive sleep apnea, including initial adjustment; dual arch, with additional mandibular advancement, non-fixed hinge mechanism

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0966T	Impression and custom preparation of jaw expansion oral prosthesis for obstructive sleep apnea, including initial adjustment; dual arch, with additional mandibular advancement, fixed hinge mechanism
0967T	Transanal insertion of endoluminal temporary colorectal anastomosis protection device, including vacuum anchoring component and flexible sheath connected to external vacuum source and monitoring system
0968T	Insertion or replacement of epicranial neurostimulator system, including electrode array and pulse generator, with connection to electrode array
0969T	Removal of epicranial neurostimulator system
0970T	Ablation, benign breast tumor (e.g., fibroadenoma), percutaneous, laser, including imaging guidance when performed, each tumor
0971T	Ablation, malignant breast tumor(s), percutaneous, laser, including imaging guidance when performed, unilateral
0972T	Assistive algorithmic classification of burn healing (i.e., healing or nonhealing) by noninvasive multispectral imaging, including system set-up and acquisition, selection, and transmission of images, with automated generation of report
0973T	Selective enzymatic debridement, partial-thickness and/or full-thickness burn eschar, requiring anesthesia (i.e., general anesthesia, moderate sedation), including patient monitoring, trunk, arms, legs; first 100 sq cm
0974T	Selective enzymatic debridement, partial-thickness and/or full-thickness burn eschar, requiring anesthesia (i.e., general anesthesia, moderate sedation), including patient monitoring, trunk, arms, legs; each additional 100 sq cm (List separately in addition to code for primary procedure)
0975T	Selective enzymatic debridement, partial-thickness and/or full-thickness burn eschar, requiring anesthesia (i.e., general anesthesia, moderate sedation), including patient monitoring, scalp, neck, hands, feet, and/or multiple digits; first 100 sq cm
0976T	Selective enzymatic debridement, partial-thickness and/or full-thickness burn eschar, requiring anesthesia (i.e., general anesthesia, moderate sedation), including patient monitoring, scalp, neck, hands, feet, and/or multiple digits; each additional 100 sq cm (List separately in addition to code for primary procedure)
0977T	Upper gastrointestinal blood detection, sensor capsule, with interpretation and report
0978T	Submucosal cryolysis therapy; soft palate, base of tongue, and lingual tonsil
0979T	Submucosal cryolysis therapy; soft palate only
0980T	Submucosal cryolysis therapy; base of tongue and lingual tonsil only
0981T	Transcatheter implantation of wireless inferior vena cava sensor for long-term hemodynamic monitoring, including deployment of the sensor, radiological supervision and interpretation, right heart catheterization, and inferior vena cava venography, when performed
0982T	Remote monitoring of implantable inferior vena cava pressure sensor, physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial set-up and patient education on use of equipment
0983T	Remote monitoring of an implanted inferior vena cava sensor for up to 30 days, including at least weekly downloads of inferior vena cava area recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional
0984T	Intravascular imaging of extracranial cerebral vessels using optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention, including all associated radiological supervision, interpretation, and report; initial vessel (List separately in addition to code for primary procedure)
0985T	Intravascular imaging of extracranial cerebral vessels using optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention, including all associated radiological supervision, interpretation, and report; each additional vessel (List separately in addition to code for primary procedure)
0986T	Intravascular imaging of intracranial cerebral vessels using optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention, including all associated radiological supervision, interpretation, and report; initial vessel (List separately in addition to code for primary procedure)
0987T	Intravascular imaging of intracranial cerebral vessels using optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention, including all associated radiological supervision, interpretation, and report; each additional vessel (List separately in addition to code for primary procedure)
0988T	Open insertion or replacement of integrated neurostimulation system for bladder dysfunction including electrode(s) (e.g., array or leadless), and pulse generator or receiver, including analysis, programming, and imaging guidance, when performed, posterior tibial nerve; subcutaneous and subfascial
0989T	Revision or removal of integrated neurostimulation system for bladder dysfunction, including analysis, programming, and imaging, when performed, posterior tibial nerve; subcutaneous and subfascial
0990T	Transcervical instillation of biodegradable hydrogel materials, intrauterine
0991T	Cystourethroscopy, with low-energy lithotripsy and acoustically actuated microspheres, including imaging
0992T	Noninvasive assessment of cardiac risk derived from augmentative software analysis of perivascular fat without concurrent computed tomography (CT) scan of the heart, including patient-specific clinical factors, with interpretation and report by a physician or other qualified health care professional
0993T	Noninvasive assessment of cardiac risk derived from augmentative software analysis of perivascular fat with concurrent computed tomography scan of the heart, including patient-specific clinical factors, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)

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0994T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; percutaneous
0995T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; open
0996T	Insertion and scleral fixation of a capsular bag prosthesis containing an intraocular lens prosthesis, with vitrectomy, including removal of crystalline lens or dislocated intraocular lens prosthesis, when performed
0997T	Precuneus magnetic stimulation; treatment planning using magnetic resonance imaging-guided neuronavigation to determine optimal location, dose, and intensity for magnetic stimulation therapy, derived from evoked potentials from single pulses of electromagnetic energy recorded by 64-channel electroencephalogram, including automated data processing, transmission, analysis, generation of treatment parameters with review, interpretation, and report
0998T	Precuneus magnetic stimulation; personalized treatment delivery of magnetic stimulation therapy to a prespecified target area derived from analysis of evoked potentials within the precuneus, utilizing magnetic resonance imaging-based neuronavigation, with management, per day
0999T	Autologous muscle cell therapy, harvesting of muscle progenitor cells, including ultrasound guidance, when performed
0559T	Patient-specific anatomic model or structure 3D-printed from image or anatomical data set(s); first individually prepared and processed component
0560T	Patient-specific anatomic model or structure 3D-printed from image or anatomical data set(s); each additional individually prepared and processed component (List separately in addition to code for primary procedure)
0582T	Transurethral ablation of malignant prostate tissue by high-energy water vapor thermotherapy, including intraoperative imaging and needle guidance; initial lesion
1000T	Autologous muscle cell therapy, administration of muscle progenitor cells into the urethral sphincter, including cystoscopy and post-void residual ultrasound, when performed
1001T	Autologous muscle cell therapy, injection of muscle progenitor cells into the external anal sphincter, including ultrasound guidance, when performed
1002T	Air displacement plethysmography, whole-body composition assessment, with interpretation and report
1003T	Arthroplasty, first carpometacarpal joint, with distal trapezial and proximal first metacarpal prosthetic replacement (eg, first carpometacarpal total joint)
1004T	Electronic analysis of implanted sub-scalp continuous bilateral electroencephalography monitoring system (eg, contact group[s], gain, bandpass filters) by physician or other qualified health care professional; without programming
1005T	Electronic analysis of implanted sub-scalp continuous bilateral electroencephalography monitoring system (eg, contact group[s], gain, bandpass filters) by physician or other qualified health care professional; with programming, first 15 minutes face-to-face time with physician or other qualified health care professional
1006T	Electronic analysis of implanted sub-scalp continuous bilateral electroencephalography monitoring system (eg, contact group[s], gain, bandpass filters) by physician or other qualified health care professional; with programming, each additional 15 minutes face-to-face time with physician or other qualified health care professional (List separately in addition to code for primary procedure)
1007T	Electroencephalogram from implanted sub-scalp continuous bilateral electroencephalography monitoring system, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and report, up to 30 days of recording without video
1008T	Remote monitoring of sub-scalp implanted continuous bilateral electroencephalography monitoring system, device fitting, initial set-up, and patient education in wearing of system and use of equipment
1009T	Remote monitoring of a sub-scalp implanted continuous bilateral electroencephalography monitoring system, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and report, up to 30 days of recording without video
1010T	Computerized ophthalmic analysis of monocular eye movements using retinal-based eye-tracking without spatial calibration, including fixation, microsaccades, drift, and horizontal saccades, when performed, unilateral or bilateral, with interpretation and report
1011T	Photobiomodulation (PBM) therapy of oral cavity, including placement of an oral device, monitoring of patient tolerance to treatment, and removal of the oral device
1012T	Motorized ab interno trephination of sclera (sclerostomy), or trabecular meshwork (trabeculostomy), 1 or more, including injection of antifibrotic agents, when performed
1013T	Laparoscopy, surgical, implantation or replacement of lower esophageal sphincter neurostimulator electrode array and neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver, including cruroplasty and/or electronic analysis, when performed
1014T	Laparoscopic revision or removal, lower esophageal sphincter neurostimulator electrodes
1015T	Revision or removal, lower esophageal sphincter neurostimulator pulse generator or receiver
1016T	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude and duration, configuration of waveform, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements), lower esophageal sphincter neurostimulator pulse generator/transmitter; intraoperative, with

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	programming
1017T	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude and duration, configuration of waveform, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements), lower esophageal sphincter neurostimulator pulse generator/transmitter; subsequent, without reprogramming
1018T	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude and duration, configuration of waveform, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements), lower esophageal sphincter neurostimulator pulse generator/transmitter; subsequent, with reprogramming
1019T	Lymphovenous bypass, including robotic assistance, when performed, per extremity
1020T	Raman spectroscopy of 1 or more skin lesions, with probability score for malignant risk derived by algorithmic analysis of data from each lesion
1021T	Active thoracic irrigation (separate procedure)
1022T	Percutaneous tissue displacement, any method, including imaging guidance; intra-abdominal/pelvic structures (List separately in addition to code for primary procedure)
1023T	Percutaneous tissue displacement, any method, including imaging guidance; intrathoracic structures (List separately in addition to code for primary procedure)
1024T	Percutaneous tissue displacement, any method, including imaging guidance; soft tissue (List separately in addition to code for primary procedure)
1025T	Alternating electric fields dosimetry and delivery-simulation modeling, creation and selection of patient-specific array layouts, and placement verification
1026T	Transvaginal laser photobiomodulation therapy of pelvis, provided by a physician or other qualified health care professional
1027T	Percutaneous insertion or replacement of neurostimulation catheter via left subclavian or left jugular vein into the superior vena cava, with verification of capture of phrenic nerves, mapping and programming, and delivery of transvenous phrenic neurostimulation therapy in ventilated patients, with repositioning when performed, including imaging guidance
1028T	Mapping and programming of neurostimulation catheter with delivery of transvenous phrenic neurostimulation therapy in ventilated patients, with repositioning and verification of left phrenic nerve capture, per session
1029T	Mapping and programming of neurostimulation catheter with delivery of transvenous phrenic neurostimulation therapy in ventilated patients, without catheter repositioning, per session
1036T	Noninvasive hemodynamic assessment with pulmonary pressures and ejection fraction when performed, including passive acquisition of acoustic and electrical signals, augmentative algorithmic analysis, and generation of a clinical report with review, interpretation, and clinical integration by a physician or other qualified health care professional
1037T	Histotripsy (i.e., non-thermal ablation via acoustic energy delivery) of malignant pancreatic tissue, including imaging guidance
1038T	Autologous muscle cell therapy, injection(s) of muscle progenitor cells into the tongue, including esophagoscopy, when performed
1039T	Connectomic analysis of previously performed multi-modal brain magnetic resonance imaging (MRI) requiring physician or other qualified health care professional (QHP) analysis of software- and physician-generated structural and functional maps for integration of cortical grey matter correlation based on restingstate functional MRI and mapping of white matter connectivity based on diffusionweighted MRI relative to brain regions, with physician or other QHP interpretation and report
1040T	Bronchoscopy, flexible, with bronchial cryotherapy, 1 lung, including trachea, when performed
1041T	Augmentative algorithmic analysis of encephalographic waveforms to identify the source and propagation of epileptiform activity, including artifact reduction with analysis of 3D localization of spike sources throughout the examination, 3D animations over time of high-amplitude event locations, high-frequency activity locations, and temporal relationships among locations, with interpretation and report by physician or other qualified health care professional, related to a previously performed electroencephalogram (EEG
1042T	Implantation of absorbable urologic scaffold for prostatic urethra restoration of reconstructed bladder neck and urethral anastomosis (List separately in addition to code for primary procedure
1044T	Harvest of full-thickness skin for autologous heterogeneous skin-construct graft, including direct closure of donor site; first 5 sq cm or less
1045T	Harvest of full-thickness skin for autologous heterogeneous skin-construct graft, including direct closure of donor site; each additional 5 sq cm, or part thereof (List separately in addition to code for primary procedure)
1046T	Autologous heterogeneous skin-construct graft application, trunk, arms, legs; first 50 sq cm or less, or 0.5% of body area of infants and children
1047T	Autologous heterogeneous skin-construct graft application, trunk, arms, legs; each additional 50 sq cm, or each additional 0.5% of body area of infants and children, or part thereof (List separately in addition to code for primary

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	procedure
1048T	Autologous heterogeneous skin-construct graft application, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 50 sq cm or less, or 0.5% of body area of infants and children
1049T	Autologous heterogeneous skin-construct graft application, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 50 sq cm, or each additional 0.5% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)
1050T	Insertion, subcutaneous heart failure decompensation monitor, containing sensors that measure, at a minimum, heart rate, impedance, respiration rate, physical activity, heart sounds
1051T	Removal of subcutaneous heart failure decompensation monitor
1052T	Interrogation device evaluation(s), (in person or remote) up to 30 days, insertable subcutaneous heart failure decompensation monitor, analysis of physiologic parameters, including, at a minimum, heart rate, impedance, respiration rate, physical activity, heart sounds, with generation of a report, review and interpretation by a physician or other qualified health care professional
1053T	Programming device evaluation (in person or remote) of subcutaneous heart failure decompensation monitor, with analysis of physiologic parameters, including, at a minimum, heart rate, impedance, respiration rate, physical activity, heart sounds, with generation of a report and review and interpretation by a physician or other qualified health care professional
1030T	Creation of digital 3D model from surface mesh files of patient-specific anatomy (e.g., final anatomic representation [FAR]), cumulative time for up to 30 days; initial 30 minutes
1031T	Creation of digital 3D model from surface mesh files of patient-specific anatomy (e.g., final anatomic representation [FAR]), cumulative time for up to 30 days; each additional 30 minutes (List separately in addition to code for primary procedure)
1032T	Creation of digital 3D model from surface mesh files of patient-specific anatomy (e.g., final anatomic representation [FAR]) and digital simulation, cumulative time for up to 30 days; initial 60 minutes
1033T	Creation of digital 3D model from surface mesh files of patient-specific anatomy (e.g., final anatomic representation [FAR]) and digital simulation, cumulative time for up to 30 days; each additional 30 minutes (List separately in addition to code for primary procedure)
1034T	Creation of digital 3D model from surface mesh files of patient-specific anatomy (e.g., final anatomic representation [FAR]), digital simulation, and computational analyses (e.g., computational fluid dynamics, finite element analysis), cumulative time for up to 30 days; initial 90 minutes
1035T	Creation of digital 3D model from surface mesh files of patient-specific anatomy (e.g., final anatomic representation [FAR]), digital simulation, and computational analyses (e.g., computational fluid dynamics, finite element analysis), cumulative time for up to 30 days; each additional 30 minutes (List separately in addition to code for primary procedure)
1043T	Quantitative magnetic resonance, without imaging, for analysis of liver tissue, including assessment of 1 or more parameters (e.g., proton density fat fraction [PDFF], water diffusion, T1-water relaxation time), with automatically generated report
1072T	Liver allograft, normothermic machine perfusion; each additional hour of monitoring and management (List separately in addition to code for primary procedure)
1073T	Liver allograft, normothermic machine perfusion; decannulation
1074T	Liver allograft, hypothermic oxygenated perfusion; cannulation
1075T	Liver allograft, hypothermic oxygenated perfusion; connection to perfusion device
1076T	Liver allograft, hypothermic oxygenated perfusion; monitoring and management, first 2 hours
1077T	Liver allograft, hypothermic oxygenated perfusion; each additional hour of monitoring and management (List separately in addition to code for primary procedure)
1078T	Liver allograft, hypothermic oxygenated perfusion; decannulation
1054T	Focused non-shock wave ultrasonic propulsion of residual stone fragment(s) postlithotripsy, unilateral, including ultrasound guidance, fragment(s) less than or equal to 5 mm
1055T	Intraoperative radiofrequency ablation of lumpectomy cavity, unilateral, including applicator placement and removal (List separately in addition to code for primary procedure
1056T	Cochlear infusion of pharmacologic agent (i.e., gene therapy vector), including mastoidectomy, labyrinthotomy, and repair of fenestrations
1057T	Insertion or replacement of subcutaneous neurostimulator pulse generators, with tunneling of 4 electrode arrays, bilateral supraorbital and occipital nerves, including all interrogation, programming, and imaging guidance, when performed
1058T	Revision of implanted subcutaneous unilateral supraorbital and occipital neurostimulator system, including all interrogation, programming, and imaging guidance, when performed
1059T	Removal of implanted subcutaneous unilateral supraorbital and occipital neurostimulator system
1060T	Electronic analysis of implanted subcutaneous supraorbital-occipital neurostimulator pulse generator (e.g., frequency, amplitude, pulse width, leads, electrode configuration); with complex programming by physician or other qualified health care professional

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1061T	Electronic analysis of implanted subcutaneous supraorbital-occipital neurostimulator pulse generator (e.g., frequency, amplitude, pulse width, leads, electrode configuration); with simple programming by physician or other qualified health care professional
1062T	Artificial insemination, transcervical intratubal, unilateral or bilateral, including imaging guidance
1063T	Oncology (bladder), augmentative algorithmic analysis of histomorphologic features in digitized slides from formalin-fixed paraffin-embedded (FFPE) bladder cancer tissue (high-grade, non-muscle invasive), with clinicopathologic variables entered by the qualified health care professional; algorithm-derived parameters reported as prognostic of recurrence and progression, including hematoxylin and eosin staining of tissue sections, and digitization of glass microscope slides, when performed
1064T	Oncology (bladder), augmentative algorithmic analysis of histomorphologic features in digitized slides from formalin-fixed paraffin-embedded (FFPE) bladder cancer tissue (high-grade, non-muscle invasive), with clinicopathologic variables entered by the qualified health care professional; algorithm-derived parameters reported as predictive of response to Bacillus Calmette-Guérin (BCG) therapy, including hematoxylin and eosin staining of tissue sections, and digitization of glass microscope slides, when performed
1065T	Cystourethroscopy, with CO2 cryotherapy spray, in a gaseous bladder environment with pressure monitoring, for treatment of; minor bladder lesion(s) (total lesion[s] diameters less than 0.5 cm)
1066T	Cystourethroscopy, with CO2 cryotherapy spray, in a gaseous bladder environment with pressure monitoring, for treatment of; small bladder lesion(s) (total lesion[s] diameters greater than or equal to 0.5 cm and less than 2.0 cm)
1067T	Cystourethroscopy, with CO2 cryotherapy spray, in a gaseous bladder environment with pressure monitoring, for treatment of; medium bladder lesion(s) (total lesion[s] diameters greater than or equal to 2.0 cm and less than 5.0 cm
1068T	Cystourethroscopy, with CO2 cryotherapy spray, in a gaseous bladder environment with pressure monitoring, for treatment of; large bladder lesion(s) (total lesion[s] diameters greater than or equal to 5.0 cm
1069T	Mechanical extremity (i.e., hands and feet) cryocompression; individual glove and boot supplies with initial measurement, fitting, and therapy education
1070T	Mechanical extremity (i.e., hands and feet) cryocompression; individual glove and boot placement, initiation of cooling pre-chemotherapy and continuing through chemotherapy administration
1071T	Mechanical extremity (i.e., hands and feet) cryocompression; post-chemotherapy treatment continuation, each 30 minutes (List separately in addition to code for primary procedure)
1079T	3D quantitative transmission water bath volumetric ultrasound tomography, breast, with augmentative algorithmic derivation of breast tissue composition (i.e., fibroglandular volume), bilateral, with physician or other qualified health care professional interpretation and report
1080T	Insertion, intracapsular magnifier, with attachment to previously placed intraocular lens
1081T	Microvascular anastomosis between a lymph node and a vein, including robot assistance, when performed; initial anastomosis
1082T	Microvascular anastomosis between a lymph node and a vein, including robot assistance, when performed; each additional anastomosis (List separately in addition to code for primary procedure)
1083T	Stereotactic placement of infusion catheter(s), brain, for delivery of therapeutic agent(s), including computerized stereotactic planning and burr hole(s)
1084T	Implantation of scaffolding allograft to reinforce the suprachoroidal space
1085T	Assistive algorithmic analysis for identification of new lesions and determination of inter-lesion heterogeneity of change in metabolic activity and volume for advanced metastatic cancer, data sets from 2 or more previously acquired positron emission tomography (PET) and/or PET computed tomography (CT) (PET/CT) studies
1086T	Intraprocedural estimate of coronary fractional flow derived by augmentative algorithmic analysis of data from real-time coronary angiography, with creation of functional map of coronary circulation, when performed, with review and interpretation (List separately in addition to code for primary procedure)
1087T	Estimate of coronary fractional flow derived by augmentative algorithmic analysis of data from previously acquired coronary angiogram, with creation of functional map of coronary circulation, when performed, with automated result
1088T	Percutaneous application of high-frequency neuromodulation signals using microneedle electrode array for the treatment of nociceptive or neuropathic pain, including electrode placement and patient training, per day
1089T	Intraoperative quantitative micro-elastography tissue characterization, including real-time imaging and physician assessment, per breast
1090T	Attachment and insertion of intraocular lens prosthesis–mounted drug-eluting implant (List separately in addition to code for primary procedure
1091T	Placement of permanent common carotid artery filter, percutaneous, bilateral, including ultrasound guidance, when performed
1092T	Implantation of acellular scaffold (e.g., hyaluronan), knee, single implant; into chondral defect, open
1093T	Implantation of acellular scaffold (e.g., hyaluronan), knee, single implant; into a chondral or osteochondral defect, arthroscopic
1094T	Implantation of acellular scaffold (e.g., hyaluronan), knee, single implant; each additional acellular scaffold implantation (List separately in addition to code for primary procedure

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1095T	Harvesting and processing of autologous bone marrow aspirate concentrate (BMAC), with application onto scaffold or injection into anatomical recipient site (e.g., subchondral bone, joint space, chondral lesion), including imaging guidance, when performed, for therapeutic musculoskeletal treatment, excluding spinal procedures
1096T	Injection(s) of thermoregulated multiphase suspension to demyelinate nerves innervating the knee joint, including imaging guidance, when performed
1097T	Oncology (pancreas), augmentative algorithmic analysis of histomorphologic features in digitized slides from formalin-fixed paraffin-embedded pancreatic cancer tissue, algorithm-derived parameters reported as prediction of response to fluorouracil backbone versus gemcitabine backbone chemotherapy, including hematoxylin and eosin staining of tissue sections and digitization of glass microscope slides, when performed
1098T	Placement of subretinal prosthesis, including vitrectomy
1099T	Ablation of incompetent vein(s), extremity, transcutaneous, high intensity–focused ultrasound (HIFU), inclusive of all imaging guidance and monitoring
1100T	Transcutaneous spinal neuromodulation programming, including history and physical examination, safety screening, selection and external placement of a multichannel spinal electrode pad, baseline spinal motor mapping, creation of individualized stimulation parameter sets for therapeutic activities, and patient and/or caregiver instruction, each 30 minutes
1101T	Transcutaneous spinal neuromodulation application in combination with therapeutic activities, direct (one-on-one) patient contact using dynamic activities to improve functional performance, including individualized external placement of a multichannel spinal electrode pad, optimization of stimulation parameters across multiple channels, and delivery of transcutaneous spinal neuromodulation during functional task performance, each 15 minutes
1102T	Intraoperative molecular assessment for lung tumor tissue, in-vivo (including assessment, when performed following lung resection), using computer-aided fluorescence imaging (List separately in addition to code for primary procedure)
1103T	Intraoperative molecular assessment for ovarian, tubal, or peritoneal tumor tissue, in-vivo (including assessment, when performed following ovarian, tubal, or peritoneal resection), using computer-aided fluorescence imaging (List separately in addition to code for primary procedure
1104T	Noninvasive cardiopulmonary assessment, including quantitative parameters, respectively predictive of significant epicardial coronary artery disease, pulmonary hypertension, and/or elevated pulmonary capillary wedge pressure, derived by augmentative algorithmic analysis of orthogonal voltage gradient and photoplethysmography signals, with automated report
1105T	Personalized neurostimulation pulse rate derived by augmentative algorithmic analysis of data from electroencephalogram (EEG) and electrocardiogram (ECG), including acquisition of EEG and single-lead ECG, with automated report
1106T	Oncology (breast), augmentative algorithmic analysis of histomorphologic features in digitized hematoxylin and eosin stained slides from formalin-fixed paraffinembedded (FFPE) breast cancer tissue, algorithm-derived parameters reported as 5-year and 10-year risks of distant metastasis, including digitization of glass microscope slides and hematoxylin and eosin staining of tissue sections, when performed
1107T	Oncology (prostate), augmentative algorithmic analysis of histomorphologic features in digitized hematoxylin and eosin stained slide(s) from formalin-fixed paraffin-embedded (FFPE) prostate cancer tissue, algorithm-derived parameters reported as 10-year risk of distant metastasis and prostate cancer specific mortality, including hematoxylin and eosin staining of tissue sections, and digitization of glass microscope slides, when performed
1108T	Stereotactic intracerebral implantation of therapeutic agent, unilateral, including cranial access and intraoperative imaging guidance, when performed; 1 or more injections along a single trajectory
1109T	Stereotactic intracerebral implantation of therapeutic agent, unilateral, including cranial access and intraoperative imaging guidance, when performed; 1 or more injections along multiple trajectories
1110T	Stereotactic intracerebral delivery of therapeutic agent, by controlled infusion, unilateral, including cranial access and intraoperative imaging guidance, when performed; single trajectory
1111T	Stereotactic intracerebral delivery of therapeutic agent, by controlled infusion, unilateral, including cranial access and intraoperative imaging guidance, when performed; multiple trajectories
1112T	Transurethral ablation of malignant prostate tissue by high-energy water vapor thermotherapy, including intraoperative imaging and needle guidance; each additional lesion (List separately in addition to code for primary procedure) [Effective 01/01/2027]
1113T	Slipped rib(s) stabilization with internal fixation, unilateral, 1-4 ribs [Effective 01/01/2027]
1114T	Transcranial photobiomodulation therapy, delivery and management, per session [Effective 01/01/2027]
1115T	Transconjunctival application of cooling probes to long ciliary nerves to control ocular pain, unilateral [Effective 01/01/2027]
1116T	Percutaneous transluminal endovascular microincision(s), peripheral dialysis segment (List separately in addition to code for primary procedure) [Effective 01/01/2027]
1117T	Intraoperative electrical stimulation of motor (or mixed) peripheral or cranial nerve(s), surgeon performed, for nerve identification, localization, and functional October 2, 2026 January 1, 2027 CPT® 2028 CPT® Copyright 2026 American Medical Association. All rights reserved. AMA and CPT are registered trademarks of the American Medical Association. Updated October 2, 2026 19 assessment, per operative session (List separately in addition to code for

	primary procedure) [Effective 01/01/2027]
1118T	Registration of a previously generated, patient-specific computed tomography angiography (CTA)-derived 2D/3D model of the cardiac conduction system to intraprocedural imaging (e.g., fluoroscopy, ultrasound), including continuous monitoring and adjustment of registration throughout the procedure [Effective 01/01/2027]
1119T	Oncology (prostate), augmentative algorithmic analysis of histomorphologic features in digitized slides from formalin-fixed paraffin-embedded (FFPE) prostate cancer tissue, algorithm-derived parameters reported as prognostic of progression, including hematoxylin and eosin staining of tissue sections, and digitization of glass microscope slides, when performed [Effective 01/01/2027]
1120T	Transcatheter modification (ie, cut or excise) of aortic valve leaflets during transcatheter valve replacement (List separately in addition to code for primary procedure [Effective 01/01/2027]
1121T	Duodenal muco-submucosal regeneration, transoral, with small intestinal enteroscopy, including fluoroscopic guidance when performed; with nonthermal pulsed field energy [Effective 01/01/2027]
1122T	Duodenal muco-submucosal regeneration, transoral, with small intestinal enteroscopy, including fluoroscopic guidance when performed; with submucosal lift and thermal ablation [Effective 01/01/2027]
1123T	Twist drill, burr hole, craniotomy, or craniectomy, including imaging guidance, for implantation of brain-computer interface cortical electrode array with concomitant insertion of brain-computer interface unit; first array and unit [Effective 01/01/2027]
1124T	Twist drill, burr hole, craniotomy, or craniectomy, including imaging guidance, for implantation of brain-computer interface cortical electrode array with concomitant insertion of brain-computer interface unit; each additional array and unit (List separately in addition to code for primary procedure) [Effective 01/01/2027]
1125T	Revision of brain-computer interface, cortical electrode array, or unit [Effective 01/01/2027]
1126T	Removal of brain-computer interface, cortical electrode array, or unit, including cranioplasty, when performed [Effective 01/01/2027]
1127T	Replacement of brain-computer interface, cortical electrode array, or unit, including cranioplasty, when performed [Effective 01/01/2027]
1128T	Intraprocedural fluorescence confocal microscopy of excised surgical specimen for evaluation of margin(s), each specimen; tissue preparation, image site selection(s), and image acquisition [Effective 01/01/2027]
1129T	Intraprocedural fluorescence confocal microscopy of excised surgical specimen for evaluation of margin(s), each specimen; image(s) interpretation [Effective 01/01/2027]
1130T	Intraprocedural fluorescence confocal microscopy of tissue specimen to determine adequacy for pathology and/or laboratory evaluation, each specimen; tissue preparation, image site selection(s), and image acquisition(s) [Effective 01/01/2027]
1131T	Intraprocedural fluorescence confocal microscopy of tissue specimen to determine adequacy for pathology and/or laboratory evaluation, each specimen; image(s) interpretation [Effective 01/01/2027]
1132T	Surgical left ventricular restoration procedure via plication using epicardial ventricular anchoring system, including imaging guidance [Effective 01/01/2027]
1133T	Endovenous cerebrospinal fluid shunt creation, dural/subarachnoid cisternal transcatheter placement of shunting device via the inferior petrosal sinus, including venous access, ultrasound guidance for vascular access, and all associated radiological supervision and interpretation, including all catheter placement(s) and intraprocedural roadmapping and image guidance necessary to complete the shunt placement, when performed [Effective 01/01/2027]
1134T	External, non-focused, hemispheric, unilateral ultrasound-mediated porphyrin metabolite activation for glioma cell destruction, including supervision of sonosensitive agent self-administration, treatment preparation (including head shaving as needed, ultrasonic coupling gel application, coupling membrane installation), and treatment monitoring [Effective 01/01/2027]
1135T	Microwave cold argon plasma wound therapy, including debridement, when performed; first 10 sq cm or less wound surface area [Effective 01/01/2027]
1136T	Microwave cold argon plasma wound therapy, including debridement, when performed; each additional 10 sq cm wound surface area (List separately in addition to code for primary procedure) [Effective 01/01/2027]
1137T	Breast malignancy risk score, 5-year prediction, derived by augmentative algorithmic analysis of a screening-mammogram dataset acquired in separate session, with automated result [Effective 01/01/2027]
1138T	Breast malignancy risk score, 5-year prediction, derived by augmentative algorithmic analysis of a screening-mammogram dataset acquired in same session, with automated result (List separately in addition to code for primary procedure) [Effective 01/01/2027]
1139T	Noninvasive identification of ST elevation myocardial infarction (STEMI), STEMI equivalents, and acute or subacute myocardial ischemia, detected by assistive algorithmic analysis of electrocardiogram previously performed for suspicion of acute coronary syndrome (List separately in addition to code for primary procedure) [Effective 01/01/2027]
1140T	Manual ab externo trephination of sclera (sclerostomy) and trabecular meshwork (trabeculostomy), including injection of antifibrotic agents, when performed [Effective 01/01/2027]
1141T	Application of wearable, continuous, digital sub-bandage pressure monitoring system, including sensor placement at multiple anatomical sites, device calibration, and real-time pressure-data acquisition to guide compression-dressing application at point of application [Effective 01/01/2027]

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1142T	Immunotherapy administration, intraprostatic, nonhormonal anti-neoplastic, including all imaging guidance [Effective 01/01/2027]
1143T	Non-endoscopic esophageal cell collection for evaluation of esophageal disease (e.g., Barrett's esophagus), using a swallowable device (e.g., capsule balloon catheter or capsule sponge), including capsule-device administration, device deployment, and cell-sample retrieval [Effective 01/01/2027]
1144T	Bronchoscopy, rigid or flexible, including fluoroscopic guidance when performed, with therapeutic drug delivery by a drug-coated balloon catheter, including mechanical dilation (e.g., rigid dilator, nondrug-coated balloon) for stricture or stenosis; first stricture or stenosis [Effective 01/01/2027]
1145T	Bronchoscopy, rigid or flexible, including fluoroscopic guidance when performed, with therapeutic drug delivery by a drug-coated balloon catheter, including mechanical dilation (e.g., rigid dilator, nondrug-coated balloon) for stricture or stenosis; each additional stricture or stenosis (List separately in addition to code for primary procedure) [Effective 01/01/2027]

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APPROVAL HISTORY

12/10/2025	Policy reviewed. No changes to coverage criteria.
12/11/2024	Policy reviewed. No changes to coverage criteria.
12/13/2023	Policy reviewed, no changes to criteria. Updated Overview, Coding and Billing, and References.
12/14/2022	Policy revised. Coverage Policy section: Removed 'Molina Clinical Review (MCR)' and added 'MCG Care Guidelines.' Removed table of CPT code ranges. Inserted T-code table, including codes and T-code description.
04/13/2022	Policy reviewed, no changes to coverage criteria, updated CPT codes.
04/05/2021	Policy reviewed, no changes.
04/23/2020	Policy reviewed, no changes.
09/18/2019	Policy reviewed, no changes.
07/10/2018	New policy.

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