

Medical Coverage Policy



CPT Category III Codes

Device/Equipment Drug Medical Surgery Test Other

Effective Date:	4/5/2011	Policy Last Updated:	11/6/2012
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Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.

Prospective review is not required.

Description:

CPT Category III codes represent temporary codes for new and emerging technologies. They have been created to allow for data collection and utilization tracking for new procedures or services. Category III codes are different from Category I CPT codes in that they identify services that may not be performed by many health care professionals across the country, some may not have FDA approval, and some services/procedure have no proven clinical efficacy.

The codes are intended to be temporary and will be retired if the procedure or service is not accepted as a Category I code within five years. In some instances Category III codes may replace temporary local codes (HCPCS Level III) assigned by carriers and intermediaries to describe new procedures or services. If a Category III code is available it must be used instead of the unlisted Category I code. The use of the unlisted code does not offer the opportunity for collection of specific data. The AMA releases new codes twice a year (January and July) on its Web site..

Medical Criteria:

Not applicable

Policy:

BCBSRI coverage categories for Category III CPT codes include the following:

- Covered;
- Not Covered and a contract exclusion;
- Not Covered as they are not FDA approved;
- Not medically necessary as there is insufficient clinical data available to support its efficacy;
- Preauthorization is required; or
- Not separately reimbursed.

NOTE: Not all CPT Category III codes have an associated Medical Policy. The grid column below for Medical Policy will be left blank if there is no policy available for that code. Available policies are typically for services requiring preauthorization and Category III codes that have

related CPT Category I and/or HCPCS codes that are either not covered or not medically necessary.

Coverage:

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement, Benefit Booklet for the applicable "Health Care Services Not Covered" coverage.

Codes:

Deleted Codes: Category III codes that have been deleted will remain on the grid with the CPT Category I replacement code that is if one has been assigned. This means that the Category III code has been assigned a permanent Category I code to describe the exact procedure, or an unlisted code. If a Category I code has not been assigned then the procedure code will no longer be active.

ALL BCBSRI PRODUCTS: COVERED

Code	Descriptor	Medical Policy
0073T	Compensator-based beam modulation treatment delivery of inverse planned treatment using 3 or more high resolution (milled or cast) compensator convergent beam modulated fields, per treatment session	Intensity Modulated Radiation Therapy (IMRT)
0184T	Excision of rectal tumor, transanal endoscopic microsurgical approach (ie, TEMS), including muscularis propria (ie, full thickness)	
0197T	Intra-fraction localization and tracking of target or patient motion during delivery of radiation therapy (eg, 3D positional tracking, gating, 3D surface tracking), each fraction of treatment	Intensity Modulated Radiation Therapy (IMRT)
0226T	Anoscopy, high resolution (HRA) (with magnification and chemical agent enhancement); diagnostic, including collection of specimen(s) by brushing or washing when performed	
0227T	Anoscopy, high resolution (HRA) (with magnification and chemical agent enhancement); with biopsy(ies)	
0260T	Total body systemic hypothermia, per day, in the neonate 28 days of age or younger (1/1/11)	
0261T	Selective head hypothermia, per day, in the neonate 28 days of age or younger (1/1/11)	
0262T	Implantation of catheter-delivered prosthetic pulmonary valve, endovascular approach (1/1/11)	
0285T	Electronic analysis of implanted peripheral subcutaneous field stimulation pulse generator, with reprogramming when performed (1/1/12)	
0291T	Intravascular optical coherence tomography (coronary native vessel or graft) during diagnostic evaluation and/or therapeutic intervention, including imaging supervision, interpretation, and report; initial vessel (1/1/12)	
0292T	Intravascular optical coherence tomography (coronary native vessel or graft) during diagnostic evaluation and/or therapeutic intervention, including imaging supervision, interpretation, and report; each additional vessel (1/1/12)	

BLUECHIP MEDICARE: COVERED

ALL OTHER BCBSRI PRODUCTS: NOT MEDICALLY NECESSARY DUE TO LACK OF PEER-REVIEWED MEDICAL LITERATURE DEMONSTRATING ITS EFFECTIVENESS

Code	Descriptor	Medical Policy
0171T	Insertion of posterior spinous process distraction device (including necessary removal of bone or ligament for insertion and imaging guidance), lumbar; single level	Interspinous Process Decompression System

0172T	Insertion of posterior spinous process distraction device (including necessary removal of bone or ligament for insertion and imaging guidance), lumbar; each additional level	Interspinous Process Decompression System
0183T	Low frequency, non-contact, non-thermal ultrasound, including topical application(s), when performed, wound assessment, and instruction(s) for ongoing care, per day	Non-Contact Ultrasound Treatment for Wounds
0233T	Skin advanced glycation endproducts (AGE) measurement by multi-wavelength fluorescent spectroscopy	Measurement of Advanced Glycation End

ALL BCBSRI PRODUCTS: PRIOR AUTHORIZATION IS REQUIRED FOR BLUE CHIP MEDICARE AND RECOMMENDED FOR ALL OTHER BCBSRI PRODUCTS.

Code	Descriptor	Medical Policy
0095T	Removal of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical	Artificial Intervertebral Disc
0164T	Removal of total disc arthroplasty, (artificial disc), anterior approach, each additional interspace, lumbar	Artificial Intervertebral Disc
0269T	Revision or removal of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) 7/1/11 NOTE: BCBSRI ONLY COVERS REMOVAL OF THE DEVICE. DOCUMENTATION MUST BE SUBMITTED FOR REVIEW. (Internal use only: The system will process the code the same as an unlisted code and be reviewed by MIC Claims)	
0270T	Revision or removal of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed) 7/1/11 NOTE: BCBSRI ONLY COVERS REMOVAL OF THE DEVICE AND DOCUMENTATION MUST BE SUBMITTED FOR REVIEW. (Internal use only: The system will process the code the same as an unlisted code and be reviewed by MIC Claims)	
0271T	Revision or removal of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed) 7/1/11 NOTE: BCBSRI ONLY COVERS REMOVAL OF THE DEVICE AND DOCUMENTATION MUST BE SUBMITTED FOR REVIEW. (Internal use only: The system will process the code the same as an unlisted code and be reviewed by MIC Claims)	
0284T	Revision or removal of pulse generator or electrodes, including imaging guidance, when performed, including addition of new electrodes, when performed 1/1/12 NOTE: BCBSRI ONLY COVERS REMOVAL OF THE DEVICE AND DOCUMENTATION MUST BE SUBMITTED FOR REVIEW. (Internal use only: The system will process the code the same as an unlisted code and be reviewed by MIC Claims)	

ALL BCBSRI PRODUCTS: WILL FOLLOW UNLISTED PROCESS (MIC REVIEW)

Code	Descriptor	Medical Policy
0289T	Corneal incisions in the donor cornea created using a laser, in preparation for penetrating or lamellar keratoplasty (1/1/12)	
0290T	Corneal incisions in the recipient cornea created using a laser, in preparation for penetrating or lamellar keratoplasty (1/1/12)	

ALL BCBSRI PRODUCTS: NOT COVERED - CONTRACT EXCLUSION

Code	Descriptor	Medical Policy
0100T	Placement of a subconjunctival retinal prosthesis receiver and pulse generator, and implantation of intra-ocular retinal electrode array, with vitrectomy	
0058T	Cryopreservation; reproductive tissue, ovarian	Infertility Diag and Treatment
0059T	Cryopreservation; oocyte(s)	Infertility Diag and Treatment
0099T	Implantation of intrastromal corneal ring segments Not covered/Contract exclusion for the treatment of myopia	

ALL BCBSRI PRODUCTS: NOT SEPARATELY REIMBURSED

Code	Descriptor	Medical Policy
0185T	Multivariate analysis of patient-specific findings with quantifiable computer probability assessment, including report	
0188T	Remote real-time interactive video-conferenced critical care, evaluation and management of the critically ill or critically injured patient; first 30-74 minutes	
0189T	Remote real-time interactive video-conferenced critical care, evaluation and management of the critically ill or critically injured patient; each additional 30 minutes	

ALL BCBSRI PRODUCTS: NOT MEDICALLY NECESSARY DUE TO LACK OF PEER-REVIEWED MEDICAL LITERATURE DEMONSTRATING ITS EFFECTIVENESS

Code	Descriptor	Medical Policy
0099T	Implantation of intrastromal corneal ring segments Not medically necessary for the treatment of keratoconus	
0019T	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified, low energy	Extracorporeal Shock Wave
0042T	Cerebral perfusion analysis using computed tomography with contrast administration, including post-processing of parametric maps with determination of cerebral blood flow, cerebral blood volume, and mean transit time	
0051T	Implantation of a total replacement heart system (artificial heart) with recipient cardiectomy	Total Artificial Hearts as Permanent Replacement Therapy
0052T	Replacement or repair of thoracic unit of a total replacement heart system (artificial heart)	Total Artificial Hearts as Permanent Replacement Therapy
0053T	Total Artificial Hearts as Permanent Replacement Therapy Replacement or repair of implantable component or components of total replacement heart system (artificial heart), excluding thoracic unit	Total Artificial Hearts as Permanent Replacement Therapy
0054T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on fluoroscopic images	Computer-Assisted Musculoskeletal Surgical Navigational Orthopedic Procedure
0055T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image guidance based on CT/MRI images	Computer-Assisted Musculoskeletal Surgical Navigational Orthopedic Procedure
0071T	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume less than 200 cc of tissue	
0072T	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume greater or equal to 200 cc of tissue	
0075T	Transcatheter placement of extracranial vertebral or intrathoracic carotid artery stent(s), including radiologic supervision and interpretation, percutaneous; initial vessel	Carotid Artery Stenting to Treat Carotid Artery Stenosis
0076T	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; each additional vessel	Carotid Artery Stenting to Treat Carotid Artery Stenosis
0078T	Endovascular repair using prosthesis of abdominal aortic aneurysm, pseudoaneurysm or dissection, abdominal aorta, involving visceral branches (superior mesenteric, celiac and/or renal artery[s])	
0079T	Placement of visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch	
0080T	Endovascular repair of abdominal aortic aneurysm, pseudoaneurysm or dissection, abdominal aorta involving visceral vessels (superior mesenteric, celiac or renal), using fenestrated modular bifurcated prosthesis (2 docking limbs), radiological supervision and interpretation	

0081T	Placement of visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch, radiological supervision and interpretation	
0085T	Breath test for heart transplant rejection	
0092T	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophyctomy for nerve root or spinal cord decompression and microdissection), each additional interspace, cervical	Artificial Intervertebral Disc
0098T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical	Artificial Intervertebral Disc
0101T	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified; high energy	Extracorporeal Shock Wave
0102T	Extracorporeal shock wave, high energy, performed by a physician, requiring anesthesia other than local, involving lateral humeral epicondyle	Extracorporeal Shock Wave
0103T	Holotranscobalamin quantitative	
0106T	Quantitative sensory testing (QST), testing and interpretation per extremity; using touch pressure stimuli to assess large diameter sensation	
0107T	Quantitative sensory testing (QST), testing and interpretation per extremity; using vibration stimuli to assess large diameter fiber sensation	
0108T	Quantitative sensory testing (QST), testing and interpretation per extremity; using cooling stimuli to assess small nerve fiber sensation and hyperalgesia	
0109T	Quantitative sensory testing (QST), testing and interpretation per extremity; using heat-pain stimuli to assess small nerve fiber sensation and hyperalgesia	
0110T	Quantitative sensory testing (QST), testing and interpretation per extremity; using other stimuli to assess sensation	
0111T	Long-chain (C20-22) omega-3 fatty acids in red blood cell (RBC) membranes	Measurement of Long Chain Omega-3 Fatty Acids in Red Blood Cell Membranes
0123T	Fistulization of sclera for glaucoma, through ciliary body	Emerging Surgical Treatments for Glaucoma
0124T	Conjunctival incision with posterior extrascleral placement of pharmacological agent (does not include supply of medication)	
0126T	Common carotid intima-media thickness (IMT) study for evaluation of atherosclerotic burden or coronary heart disease risk factor assessment	
0155T	Laparoscopy, surgical; implantation or replacement of gastric stimulation electrodes, lesser curvature (ie, morbid obesity) Deleted/Replaced with 43659 effective 1/1/12	Gastric Electrical Stimulation
0157T	Laparotomy, implantation or replacement of gastric stimulation electrodes, lesser curvature (ie, morbid obesity)	Gastric Electrical Stimulation
0159T	Computer-aided detection, including computer algorithm analysis of MRI image data for lesion detection/characterization, pharmacokinetic analysis, with further physician review for interpretation, breast MRI	
0163T	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), each additional interspace, lumbar	Artificial Intervertebral Disc
0165T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, lumbar	Artificial Intervertebral Disc
0169T	Stereotactic placement of infusion catheter(s) in the brain for delivery of therapeutic agent(s), including computerized stereotactic planning and burr hole(s)	
0174T	Computer-aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed concurrent with primary interpretation	Lung Cancer Screening Using CT Scanning or Chest Radiographs Archived 4/25/11

0175T	Computer-aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed remote from primary interpretation	Lung Cancer Screening Using CT Scanning or Chest Radiographs Archived 4/25/11
0178T	Electrocardiogram, 64 leads or greater, with graphic presentation and analysis; with interpretation and report	Electrocardiographic Body Surface Mapping
0179T	Electrocardiogram, 64 leads or greater, with graphic presentation and analysis; tracing and graphics only, without interpretation and report	Electrocardiographic Body Surface Mapping
0180T	Electrocardiogram, 64 leads or greater, with graphic presentation and analysis; interpretation and report only	Electrocardiographic Body Surface Mapping
0181T	Corneal hysteresis determination, by air impulse stimulation, bilateral, with interpretation and report	
0182T	High dose rate electronic brachytherapy, per fraction	Brachytherapy
0186T	Suprachoroidal delivery of pharmacologic agent (does not include supply of medication)	
0190T	Placement of intraocular radiation source applicator (List separately in addition to primary procedure)	
0191T	Insertion of anterior segment aqueous drainage device, without extraocular reservoir; internal approach, into the trabecular meshwork	Emerging Surgical Treatments for Glaucoma
0192T	Insertion of anterior segment aqueous drainage device, without extraocular reservoir; external approach	Emerging Surgical Treatments for Glaucoma
0195T	Arthrodesis, pre-sacral interbody technique, including instrumentation, imaging (when performed), and discectomy to prepare interspace, lumbar; single interspace	Lumbar Fusion
0196T	Arthrodesis, pre-sacral interbody technique, including instrumentation, imaging (when performed), and discectomy to prepare interspace, lumbar;	Lumbar Fusion
0198T	Measurement of ocular blood flow by repetitive intraocular pressure sampling, with interpretation and report	
0199T	Physiologic recording of tremor using accelerometer(s) and/or gyroscope(s) (including frequency and amplitude), including interpretation and report	
0200T	Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or mechanical device, when used, 1 or more needles	
0201T	Percutaneous sacral augmentation (sacroplasty), bilateral injections, including the use of a balloon or mechanical device, when used, 2 or more needles	
0202T	Posterior vertebral joint(s) arthroplasty (eg, facet joint[s] replacement), including facetectomy, laminectomy, foraminotomy, and vertebral column fixation, injection of bone cement, when performed, including fluoroscopy, single level, lumbar spine	
0205T	Intravascular catheter-based coronary vessel or graft spectroscopy (eg, infrared) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation, and report, each vessel	
0206T	Algorithmic analysis, remote, of electrocardiographic derived data with computer probability assessment, including report	Signal-Averaged Electrocardiography (SAECG)
0207T	Evacuation of meibomian glands, automated, using heat and intermittent pressure, unilateral	
0208T	Pure tone audiometry (threshold), automated; air only	
0209T	Pure tone audiometry (threshold), automated; air and bone	
0210T	Speech audiometry threshold, automated;	
0211T	Speech audiometry threshold, automated; with speech recognition	
0212T	Comprehensive audiometry threshold evaluation and speech recognition (0209T, 0211T combined), automated	

0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; single level	Facet Joint Nerve Blocks
0214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; second level	Facet Joint Nerve Blocks
0215T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; third and any additional level(s)	Facet Joint Nerve Blocks
0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; single level	Facet Joint Nerve Blocks
0217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; second level	Facet Joint Nerve Blocks
0218T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; third and any additional level(s)	Facet Joint Nerve Blocks
0219T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; cervical	
0220T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; thoracic	
0221T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; lumbar	
0222T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; each additional vertebral segment	
0223T	Acoustic cardiography, including automated analysis of combined acoustic and electrical intervals; single, with interpretation and report	
0224T	Acoustic cardiography, including automated analysis of combined acoustic and electrical intervals; multiple, including serial trended analysis and limited reprogramming of device parameter, AV or VV delays only, with interpretation and report	
0225T	Acoustic cardiography, including automated analysis of combined acoustic and electrical intervals; multiple, including serial trended analysis and limited reprogramming of device parameter, AV and VV delays, with interpretation and report	
0228T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; single level	Facet Joint Nerve Blocks
0229T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; each additional level	Facet Joint Nerve Blocks
0230T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; single level	Facet Joint Nerve Blocks
0231T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; each additional level	Facet Joint Nerve Blocks
0232T	Injection(s), platelet rich plasma, any site, including image guidance, harvesting and preparation when performed	Autologous Platelet-Derived Growth Factors (PRP)
0234T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; renal artery	
0235T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; visceral artery (except renal), each vessel	
0236T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; abdominal aorta	
0237T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; brachiocephalic trunk and	

	branches, each vessel	
0238T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; iliac artery, each vessel	
0239T	Bioimpedance spectroscopy (BIS), measuring 100 frequencies or greater, direct measurement of extracellular fluid differences between the limbs	
0240T	Esophageal motility (manometric study of the esophagus and/or gastroesophageal junction) study with interpretation and report; with 3-dimensional high resolution esophageal pressure topography	
0241T	Esophageal motility (manometric study of the esophagus and/or gastroesophageal junction) study with interpretation and report; with stimulation or perfusion during 3-dimensional high resolution esophageal pressure topography study, (eg, stimulant, acid or alkali perfusion)	
0243T	Intermittent measurement of wheeze rate for bronchodilator or bronchial-challenge diagnostic evaluation(s), with interpretation and report	
0244T	Continuous measurement of wheeze rate during treatment assessment or during sleep for documentation of nocturnal wheeze and cough for diagnostic evaluation 3 to 24 hours, with interpretation and report	
0245T	Open treatment of rib fracture requiring internal fixation, unilateral; 1-2 ribs	
0246T	Open treatment of rib fracture requiring internal fixation, unilateral; 3-4 ribs	
0247T	Open treatment of rib fracture requiring internal fixation, unilateral; 5-6 ribs	
0248T	Open treatment of rib fracture requiring internal fixation, unilateral; 7 or more ribs	
0249T	Ligation, hemorrhoidal vascular bundle(s), including ultrasound guidance	
0253T	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; internal approach, into the suprachoroidal space	
0254T	Endovascular repair of iliac artery bifurcation (eg, aneurysm, pseudoaneurysm, arteriovenous malformation, trauma) using bifurcated endoprosthesis from the common iliac artery into both the external and internal iliac artery, unilateral;	
0255T	Endovascular repair of iliac artery bifurcation (eg, aneurysm, pseudoaneurysm, arteriovenous malformation, trauma) using bifurcated endoprosthesis from the common iliac artery into both the external and internal iliac artery, unilateral; radiological supervision and interpretation	
0263T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure including unilateral or bilateral bone marrow harvest 7/1/11	
0264T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure excluding bone marrow harvest 7/1/11	
0265T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; unilateral or bilateral bone marrow harvest only for intramuscular autologous bone marrow cell therapy 7/1/11	
0266T	Implantation or replacement of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) 7/1/11	
0267T	Implantation or replacement of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed) 7/1/11	
0268T	Implantation or replacement of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed) 7/1/11	

0272T	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day); 7/1/11	
0273T	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day); with programming 7/1/11	
0274T	Percutaneous laminotomy/laminectomy (intradiscal approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy) any method under indirect image guidance (eg, fluoroscopic, CT), with or without the use of an endoscope, single or multiple levels, unilateral or bilateral; cervical or thoracic 7/1/11	

0278T	Transcutaneous electrical modulation pain reprocessing (eg, scrambler therapy), each treatment session (includes placement of electrodes) 01/01/12	
0281T	Percutaneous transcatheter closure of the left atrial appendage with implant, including fluoroscopy, transseptal puncture, catheter placement(s), left atrial angiography, left atrial appendage angiography, radiological supervision and interpretation 01/01/12	
0282T	Percutaneous or open implantation of neurostimulator electrode array(s), subcutaneous (peripheral subcutaneous field stimulation), including imaging guidance, when performed, cervical, thoracic or lumbar; for trial, including removal at the conclusion of trial period 01/01/12	
0283T	Percutaneous or open implantation of neurostimulator electrode array(s), subcutaneous (peripheral subcutaneous field stimulation), including imaging guidance, when performed, cervical, thoracic or lumbar; permanent, with implantation of a pulse generator 01/01/12	
0286T	Near-infrared spectroscopy studies of lower extremity wounds (eg, for oxyhemoglobin measurement) 01/01/12	
0287T	Near-infrared guidance for vascular access requiring real-time digital visualization of subcutaneous vasculature for evaluation of potential access sites and vessel patency 01/01/12	
0288T	Anoscopy, with delivery of thermal energy to the muscle of the anal canal (eg, for fecal incontinence) 01/01/12	
0293T	Insertion of left atrial hemodynamic monitor; complete system, includes implanted communication module and pressure sensor lead in left atrium including transseptal access, radiological supervision and interpretation, and associated injection procedures, when performed 01/01/12	
0294T	Insertion of left atrial hemodynamic monitor pressure sensor lead at time of insertion of pacing cardioverter-defibrillator pulse generator including radiological supervision and interpretation and associated injection procedures, when performed (1/1/12)	
0295T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation (01/01/12)	
0296T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; recording (includes connection and initial recording) (01/01/12)	
0297T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; scanning analysis with report (01/01/12)	
0298T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; review and interpretation 01/01/12	
0299T	Extracorporeal shock wave for integumentary wound healing, high energy, including topical application and dressing care; initial wound (01/01/12)	Extracorporeal Shock Wave Therapy
0300T	Extracorporeal shock wave for integumentary wound healing, high energy, including topical application and dressing care; each additional wound (01/01/12)	Extracorporeal Shock Wave Therapy
0301T	Destruction/reduction of malignant breast tumor with externally applied focused microwave, including interstitial placement of disposable catheter with combined temperature monitoring probe and microwave focusing sensocatheter under ultrasound thermotherapy guidance (01/01/12)	

CATEGORY III : DELETED CODES

Code	Descriptor	Related Medical Policy
0017T	Destruction of macular drusen, photocoagulation DELETED USE UNLISTED CODE 67299 (1/1/11)	
0030T	Antiprothrombin (phospholipid cofactor) antibody, each Ig class DELETED USE UNLISTED CODE 86849 (1/1/13)	
0048T	Implantation of a ventricular assist device, extracorporeal, percutaneous transeptal access, single or dual cannulation Delete/Replaced w/ unlisted 33991 1/1/13	
0050T	Removal of a ventricular assist device, extracorporeal, percutaneous transeptal access, single or dual cannulation Delete 1/1/13	
0141T	Pancreatic islet cell transplantation through portal vein, percutaneous (Medicare/participating in clinical trials) Deleted/Replaced with 48999 (1/1/12)	Islet Cell Transplant
0142T	Pancreatic islet cell transplantation through portal vein, open (Medicare/participating in clinical trials) Deleted/Replaced with 48999 (1/1/12)	Islet Cell Transplant
0143T	Laparoscopy, surgical, pancreatic islet cell transplantation through portal vein (Medicare/participating in clinical trials) Deleted/Replaced with 48999 (1/1/12)	Islet Cell Transplant
0156T	Laparoscopy, surgical; revision or removal of gastric stimulation electrodes, lesser curvature (ie, morbid obesity) Deleted/Replaced with unlisted 43659 (1/1/12)	Gastric Electrical Stimulation
0158T	Laparotomy, revision or removal of gastric stimulation electrodes, lesser curvature (ie, morbid obesity) Deleted/Replaced with unlisted 43659 (1/1/12)	Gastric Electrical Stimulation
0166T	Transmyocardial transcatheter closure of ventricular septal defect, with implant; without cardiopulmonary bypass Deleted/Replaced with unlisted 33999 effective 1/1/12	
0167T	Transmyocardial transcatheter closure of ventricular septal defect, with implant; with cardiopulmonary bypass Deleted/Replaced with unlisted 33999 effective 1/1/12	
0168T	Rhinophototherapy, intranasal application of ultraviolet and visible light, bilateral Deleted/Replaced with unlisted 30999 effective 1/1/12	
0173T	Monitoring of intraocular pressure during vitrectomy surgery Delete 1/1/13	
0242T	Gastrointestinal tract transit and pressure measurement, stomach through colon, wireless capsule, with interpretation and report Delete/Replaced w/ 91112-1/1/13	Wireless Capsule Endoscopy
0250T	Airway sizing and insertion of bronchial valve(s), each lobe Delete/Replaced w/ 31647-1/1/13	
0251T	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with removal of bronchial valve(s), initial lobe Delete/Replaced w/ 31648-1/1/13	
0252T	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with removal of bronchial valve(s), each additional lobe Delete/Replaced w/ 31649-1/1/13	
0256T	Implantation of catheter-delivered prosthetic aortic heart valve; endovascular approach Delete/Replaced w/33361, 33362, 33363, 33364-1/1/13	
0257T	Implantation of catheter-delivered prosthetic aortic heart valve; open thoracic approach (eg, transapical, transventricular)Delete/Replaced w/33365, 0318T-1/1/13	
0258T	Transthoracic cardiac exposure (eg, sternotomy, thoracotomy, subxiphoid) for catheter-delivered aortic valve replacement; without cardiopulmonary bypassDelete/Replaced w/33365, 0318T-1/1/13	
0259T	Transthoracic cardiac exposure (eg, sternotomy, thoracotomy, subxiphoid) for catheter-delivered aortic valve replacement; with cardiopulmonary bypass Delete-1/1/13	
0275T	Percutaneous laminotomy/laminectomy (intralaminar approach) for	

	decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy) any method under indirect image guidance (eg, fluoroscopic, CT), with or without the use of an endoscope, single or multiple levels, unilateral or bilateral; lumbar (7/1/2011) Deleted 1/1/12 with no replacement code.	
0276T	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe (includes moderate sedation) 01/01/12 Delete/replace w/ 31660 1/1/13	
0277T	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes (includes moderate sedation) 01/01/12 Delete/ replace w/ 31661 1/1/13	
0279T	Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood); Delete/replace w/ 86152 1/1/13	Detection of Circulating Tumor Cells in the Management of Patients with Cancer
0280T	Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood); interpretation and report 01/01/12 Delete/replace w/ 86153 1/1/13	Detection of Circulating Tumor Cells in the Management of Patients with Cancer

Related Topics:

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Review History:

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