



## The Health Plan MSK Interventional Pain Code List

Category	CPT <sup>®</sup> Code	CPT® Code Description
Interventional Pain	22526	Percutaneous Intradiscal Electrothermal Annuloplasty, Unilateral Or Bilateral Including Fluoroscopic Guidance; Single Level
Management	22526	Percutarieous intradiscar Electrotriernar Armdopiasty, Officiaterar Or Bilaterar including Pidoroscopic Guidance, Single Level
Interventional Pain	22527	Percutaneous Intradiscal Electrothermal Annuloplasty, Unilateral Or Bilateral Including Fluoroscopic Guidance; Once Or More Additional Levels (List Separately In Addition To
Management		Code For Primary Procedure)
Interventional Pain Management	27096	Injection Procedure For Sacroiliac Joint, Anesthetic/Steroid, With Image Guidance (Fluoroscopy Or Ct) Including Arthrography When Performed
Interventional Pain	62263	Percutaneous Lysis Of Epidural Adhesions Using Solution Injection (E.G., Hypertonic Saline, Enzyme) Or Mechanical Means (E.G., Catheter) Including Radiologic Localization
Management		(Includes Contrast When Administered), Multiple Adhesiolysis Sessions; 2 Or More Days
Interventional Pain	62264	Percutaneous Lysis Of Epidural Adhesions Using Solution Injection (E.G., Hypertonic Saline, Enzyme) Or Mechanical Means (E.G., Catheter) Including Radiologic Localization
Management		(Includes Contrast When Administered), Multiple Adhesiolysis Sessions; 1 Day
Interventional Pain Management	62280	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Subarachnoid
Interventional Pain Management	62281	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Epidural, Cervical Or Thoracic
Interventional Pain Management	62282	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Epidural, Lumbar, Sacral (Caudal)
Interventional Pain Management	62287	Decompression Procedure, Percutaneous, Of Nucleus Pulposus Of Intervertebral Disc, Any Method Utilizing Needle Based Technique To Remove Disc Material Under Fluoroscopic Imaging Or Other Form Of Indirect Visualization, With Discography And/Or Epidural Injection(S) At The Treated Level(S), When Performed, Single Or Multiple Levels, Lumbar
Interventional Pain Management	62292	Injection Procedure For Chemonucleolysis, Including Discography, Intervertebral Disc, Single, Or Multiple Levels, Lumbar
Interventional Pain Management	62320	Injection(S), Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Including Needle Or Catheter Placement, Interlaminar Epidural Or Subarachnoid, Cervical Or Thoracic; Without Imaging Guidance
Interventional Pain Management	62321	Injection(S), Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Including Needle Or Catheter Placement, Interlaminar Epidural Or Subarachnoid, Cervical Or Thoracic; With Imaging Guidance (Ie, Fluoroscopy Or Ct)
Interventional Pain Management	62322	Injection(S), Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Including Needle Or Catheter Placement, Interlaminar Epidural Or Subarachnoid, Lumbar Or Sacral (Caudal); Without Imaging Guidance
Interventional Pain Management	62323	Injection(S), Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Including Needle Or Catheter Placement, Interlaminar Epidural Or Subarachnoid, Lumbar Or Sacral (Caudal); With Imaging Guidance (Ie, Fluoroscopy Or Ct)
Interventional Pain Management	62324	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus, Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Interlaminar Epidural Or Subarachnoid, Cervical Or Thoracic; Without Imaging Guidance
Interventional Pain Management	62325	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus, Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Interlaminar Epidural Or Subarachnoid, Cervical Or Thoracic; With Imaging Guidance (Ie, Fluoroscopy Or Ct)
Interventional Pain Management	62326	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus, Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Interlaminar Epidural Or Subarachnoid, Lumbar Or Sacral (Caudal); Without Imaging Guidance

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62327	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus, Of Diagnostic Or Therapeutic Substance(S) (Eg, Anesthetic, Antispasmodic, Opioid, Steroid, Other Solution), Not Including Neurolytic Substances, Interlaminar Epidural Or Subarachnoid, Lumbar Or Sacral (Caudal); With Imaging Guidance (Ie, Fluoroscopy Or Ct)
62350	Implantation, Revision Or Repositioning Of Tunneled Intrathecal Or Epidural Catheter, For Long-Term Medication Administration Via An External Pump Or Implantable Reservoir/Infusion Pump; Without Laminectomy
62351	Implantation, Revision Or Repositioning Of Tunneled Intrathecal Or Epidural Catheter, For Long-Term Medication Administration Via An External Pump Or Implantable Reservoir/Infusion Pump; With Laminectomy
62360	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Subcutaneous Reservoir
62361	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Subcutaneous Reservoir; Nonprogrammable Pump
62362	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Programmable Pump, Including Preparation Of Pump, With Or Without Programming
63650	Percutaneous Implantation Of Neurostimulator Electrode Array, Epidural
63655	Laminectomy For Implantation Of Neurostimulator Electrodes, Plate/Paddle, Epidural
63663	Revision including replacement, when performed, of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed
63664	Revision including replacement, when performed, of spinal neurostimulator electrode plate/paddle(s) place via laminectomy, including fluoroscopy, when performed
63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver
64451	Injection(s), anesthetic agent(s) and/or steroid; nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)
64479	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Single Level
64480	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Each Additional Level (List Separately In Addition To Code For Primary Procedure)
64483	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Single Level
64484	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Each Additional Level (List Separately In Addition To Code For Primary Procedure)
64490	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Single Level
64491	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Second Level (List Separately In Addition To Code For Primary Procedure)
64492	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Third And Any Additional Level(S) (List Separately In Addition To Code For Primary Procedure)
64493	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Lumbar Or Sacral; Single Level
64494	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Lumbar Or Sacral; Second Level (List Separately In Addition To Code For Primary Procedure)
64495	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Lumbar Or Sacral; Third And Any Additional Level(S) (List Separately In Addition To Code For Primary Procedure)
64510	Injection, Anesthetic Agent; Stellate Ganglion (Cervical Sympathetic)
64520	Injection, Anesthetic Agent; Lumbar Or Thoracic (Paravertebral Sympathetic)
64625	Radiofrequency ablation, nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)
64633	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Single Facet Joint
64634	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Each Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)
64635	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluroscopy Or Ct); Lumbar Or Sacral, Single Facet Joint
	62327 62350 62351 62360 62361 62362 63650 63655 63663 63664 63685 64451 64479 64480 64483 64484 64490 64491 64492 64493 64494 64495 64510 64520 64625 64633

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Interventional Pain Management	64636	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluroscopy Or Ct); Lumbar Or Sacral, Each Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)
Interventional Pain Management	0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; single level
Interventional Pain Management	0214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; second level (List separately in addition to code for primary procedure)
Interventional Pain Management	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) (List separately in addition to code for primary procedure)
Interventional Pain Management	0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; single level
Interventional Pain Management	0217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; second level (List separately in addition to code for primary procedure)
Interventional Pain Management	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) (List separately in addition to code for primary procedure)
Interventional Pain Management	0228T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Cervical/Thoracic; Single Level
Interventional Pain Management	0229T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Cervical Or Thoracic; Each Additional Level (List Separately In Addition To Code For Primary Procedure)
Interventional Pain Management	0230T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Lumbar Or Sacral; Single Level
Interventional Pain Management	0231T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Lumbar Or Sacral; Each Additional Level (List Separately In Addition To Code For Primary Procedure)
Interventional Pain Management	0627T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level
Interventional Pain Management	0628T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level (List separately in addition to code for primary procedure)
Interventional Pain Management	0629T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level (List separately in addition to code for primary procedure)
Interventional Pain Management	0630T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level (List separately in addition to code for primary procedure)
Interventional Pain Management	0784T	Insertion or replacement of percutaneous electrode array, spinal, with integrated neurostimulator, including imaging guidance, when performed
Interventional Pain Management	0785T	Revision or removal of neurostimulator electrode array, spinal, with integrated neurostimulator
Interventional Pain Management	G0260	Injection Procedure For Sacroiliac Joint; Provision Of Anesthetic, Steroid And/Or Other Therapeutic Agent, With Or Without Arthrography
Interventional Pain Management	M0076	Prolotherapy

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