



## Cigna Commercial & Medicare Prior Authorization Procedure List: Interventional Pain Management

CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed
62263	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhIPolysis sessions; 2 or more days
62264	Percutaneous lysis of epidural adhesion using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhIPolysis sessions; 1 day
62280	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; subarachnoid
62281	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, cervical or thoracic
62282	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal)
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
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)
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
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)
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
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)
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
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; 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

Effective: 01/01/2024

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63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural
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) - Effective 1/1/2020 AMA Addition
64479	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT); cervical or thoracic, single level
64480	Injection(s), 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(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT); lumbar or sacral, single level
64484	Injection(s), 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) - Effective 1/1/2020 AMA Addition
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 (fluoroscopy or CT); lumbar or sacral, single facet joint
64636	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint (List separately in addition to code for primary procedure)
64999	This unlisted code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Unlisted procedure, nervous system
0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; single level
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)
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)

Effective: 01/01/2024

CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; single level
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)
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)
C1767	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Generator, neurostimulator (implantable), non-rechargeable
C1772	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code. Infusion pump, programmable (implantable) Effective 07/01/2021
C1778	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Lead, neurostimulator (implantable)
C1787	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Patient programmer, neurostimulator
C1816	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Receiver and/or transmitter, neurostimulator (implantable)
C1820	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Generator, neurostimulator (implantable), with rechargeable battery and charging system
C1822	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Generator, neurostimulator (implantable), high frequency, with rechargeable battery and charing system
C1883	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Adaptor/extension, pacing lead or neurostimulator lead (implantable)
C1897	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Lead, neurostimulator test kit (implantable)
E0782	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code. Infusion pump, implantable, non-programmable (includes all components, e.g., pump, catheter, connectors, etc.)
E0783	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code. Infusion pump system, implantable, programmable (includes all components, e.g., pump, catheter, connectors, etc.)
E0785	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Implantable intraspinal (epidural/intrathecal) catheter used with implantable infusion pump, replacement
E0786	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Implantable programmable infusion pump, replacement (excludes implantable intraspinal catheter)
G0260	Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography
L8679	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Implantable neurostimulator, pulse generator, any type
L8680	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Implantable neurostimulator electrode, each
L8681	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Patient programmer (external) for use with implantable programmable neurostimulator pulse generator, replacement only
L8682	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Implantable neurostimulator radiofrequency receiver

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L8683	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  Radiofrequency transmitter (external) for use with implantable neurostimulator radiofrequency receiver
L8685	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code. Implantable neurostimulator pulse generator, single array, rechargeable, includes extension
L8686	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code. Implantable neurostimulator pulse generator, single array, non-rechargeable, includes extension
L8687	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code. Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension
L8688	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code. Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension
L8689	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  External recharging system for battery (internal) for use with implantable neurostimulator, replacement only
L8695	This procedure code will be managed if submitted with a code that is in the delegated MSK program; otherwise, Cigna will manage the code.  External recharging system for battery (external) for use with implantable neurostimulator, replacement only

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Effective: 01/01/2024