

## aetna

## Aetna Better Health of Virginia Prior Authorization Procedure List: Interventional Pain Management

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Internventional Pain	20552	Injection(s); single or multiple trigger point(s), one or two muscle(s)
Internventional Pain	20553	Injection(s); single or multiple trigger point(s), three or more muscle(s)
Internventional Pain	22510	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; cervicothoracic
Internventional Pain	22511	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; lumbosacral
Internventional Pain	22512	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; each additional cervicothoracic or lumbosacral vertebral body (List separately in addition to code for primary procedure)
Internventional Pain	22513	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; thoracic
Internventional Pain	22514	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; lumbar
Internventional Pain	22515	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; each additional thoracic or lumbar vertebral body (List separately in addition to code for primary procedure)
Internventional Pain	22526	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluroscopic guidance; single level
Internventional Pain	22527	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluroscopic guidance; one or more additional levels (List separately in addition to code for primary procedure)
Internventional Pain	27096	Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid
Internventional Pain	62263	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administer
Internventional Pain	62264	Percutaneous lysis of epidural adhesion using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administere
Internventional Pain	62280	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; subarachnoid
Internventional Pain	62281	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, cervical or thoracic
Internventional Pain	62282	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance;epidural, lumbar, sacral (caudal)
Internventional Pain	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 the use of an endoscope, with discography and/or epidural injection(s) at the treated level(s), when performed, single or multiple levels, lumbar

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Internventional Pain	62290	Injection procedure for discography, each level; lumbar
Internventional Pain	62291	Injection procedure for discography, each level; cervical/thoracic
Internventional Pain	62292	Injection procedure for chemonucleolysis, including diskography, intervertebral disc, single or multiple levels, lumbar
Interventional Pain Mgmt	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 Mgmt	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 Mgmt	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 Mgmt	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 Mgmt	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 Mgmt	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 Mgmt	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
Interventional Pain Mgmt	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)
Internventional Pain	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 lamine
Internventional Pain	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 laminecto
Internventional Pain	62360	Implantation of device for intrathecal or epidural drug infusion; subcutaneous reservoir
Internventional Pain	62361	Implantation of device for intrathecal or epidural drug infusion; non-programmable pump
Internventional Pain	62362	Implantation of device for intrathecal or epidural drug infusion; programmable pump, including preparation of pump, with or without programming
Internventional Pain	62367	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); without reprogramming
Internventional Pain	62368	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming
Internventional Pain	62370	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming and refill (requiring skill of a physician or other qualified health care professional
Internventional Pain	63650	Percutaneous implantation of neurostimulator electrode array, epidural

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Internventional Pain	63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural
Internventional Pain	63663	Revision, including replacement, of spinal neurostimulator electrode percutaneous array(s)
Internventional Pain	63664	Revision, including replacement, of spinal neurostimulator electrode plate/paddle(s)
Internventional Pain	63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver
Internventional Pain	63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver, with detachable connection to electrode array
Internventional Pain	64405	Injection, anesthetic agent; greater occipital nerve
Internventional Pain	64451	Injection(s), anesthetic agent(s) and/or steroid; nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)
Internventional Pain	64479	Injection, anesthetic agent and/or steroid, transforaminal epidural; cervical or thoracic, single level
Internventional Pain	64480	Injection, anesthetic agent and/or steroid, transforaminal epidural;cervical or thoracic, each additional level (List separately in addition to code for primary procedure)
Internventional Pain	64483	Injection, anesthetic agent and/or steroid, transforaminal epidural;lumbar or sacral, single level
Internventional Pain	64484	Injection, anesthetic agent and/or steroid, transforaminal epidural;lumbar or sacral, each additional level (List separately in addition to code for primary procedure)
Internventional Pain	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
Internventional Pain	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 (
Internventional Pain	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
Internventional Pain	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
Internventional Pain	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
Internventional Pain	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 addi
Internventional Pain	64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)
Internventional Pain	64520	Injection, anesthetic agent;lumbar or thoracic (paravertebral sympathetic)
Spine	64625	Radiofrequency ablation, nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)
Internventional Pain	64633	Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; cervical or thoracic, single facet joint for the first level performed
Internventional Pain	64634	Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; cervical or thoracic, each additional level
Internventional Pain	64635	Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; lumbar or sacral, single facet joint for the first level performed
Internventional Pain	64636	Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; lumbar or sacral, each additional level

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Internventional Pain	64640	Destruction by neurolytic agent; other peripheral nerve or branch
Internventional Pain	72285	Diskography Cervical/Thoracic RS&I
Internventional Pain	72295	Diskography Lumbar RS&I
Internventional Pain	0200T	Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or mechanical device, when used, 1 or more needles, includes imaging guidance and bone biopsy, when performed
Internventional Pain	0201T	Percutaneous sacral augmentation (sacroplasty), bilateral injections, including the use of a balloon or mechanical device, when used, 2 or more needles, includes imaging guidance and bone biopsy, when performed
Internventional Pain	0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, cervical or thoracic; single level
Internventional Pain	0214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, cervical or thoracic; second level (List separately in addition to code for primary procedure)
Internventional Pain	0215T	Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, cervical or thoracic; third and any additional level(s) (List separately in addition to code for primary procedure)
Internventional Pain	0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, lumbar or sacral; single level
Internventional Pain	0217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, lumbar or sacral; second level (List separately in addition to code for primary procedure)
Internventional Pain	0218T	Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)
Internventional Pain	0627T	Percutaneous injection of allogeneic cellular and/or tissue- based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level
Internventional Pain	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)
Internventional Pain	0629T	Percutaneous injection of allogeneic cellular and/or tissue- based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; first level
Internventional Pain	0630T	Percutaneous injection of allogeneic cellular and/or tissue- based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; each additional level (List separately in addition to code for primary procedure)
Internventional Pain	0784T	Insertion or replacement of percutaneous electrode array, spinal, with integrated neurostimulator, including imaging guidance, when performed
Internventional Pain	0785T	Revision or removal of neurostimulator electrode array, spinal, with integrated neurostimulator
Internventional Pain	C1767	Generator, neurostimulator (implantable), nonrechargeable
Internventional Pain	C1787	Patient programmer, neurostimulator
Internventional Pain	C1816	Receiver and/or transmitter, neurostimulator (implantable)
Internventional Pain	C1820	Generator, neurostimulator (implantable), with rechargeable battery and charging system
Internventional Pain	G0260	Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography (when performed in ASC)
Internventional Pain	L8680	Implantable neurostimulator electrode, each

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Internventional Pain	L8681	Patient programmer (external) for use with implantable neurostimulator pulse generator, replacement
Internventional Pain	L8682	Implantable neurostimulator radiofrequency receiver
Internventional Pain	L8683	Radiofrequency transmitter (external) for use with implantable neurostimulator radiofrequency receiver
Internventional Pain	L8685	Implantable neurostimulator pulse generator, single array, rechargeable, includes extension
Internventional Pain	L8686	Implantable neurostimulator pulse generator, single array, nonrechargeable, includes extension
Internventional Pain	L8687	Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension
Internventional Pain	L8688	Implantable neurostimulator pulse generator, dual array, nonrechargeable, includes extension

CPT<sup>®</sup> copyright 2025 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.