



## Network Health Plan WI Prior Authorization Procedure List: Vascular Intervention Codes

Product	Category	Grouping	CPT® Code	CPT* Code Description	Commercial Requires Prior Authorization	Medicare Requires Prior Authorization	Allowed Billing Groupings	Commercial Effective Date	Medicare Effective Date	Commercial Termed Date
				Intracranial interventions						
Vascular Arterial Interventions	Cerebrovascular Interventions	Intracranial interventions	61624	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; central nervous system (intracranial, spinal cord)	Yes	Yes	61635	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Cerebrovascular Interventions	Intracranial interventions	61630	Balloon angioplasty, intracranial (eg. atherosclerotic stenosis), percutaneous	Yes	Yes	61630	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Cerebrovascular Interventions	Intracranial interventions	61635	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angioplasty, if performed	Yes	Yes	61624	6/1/2024	6/1/2024	Active
				Open Carotid Surgery						
Vascular Arterial Interventions	Cerebrovascular Interventions	Open Carotid Surgery	35301	Thromboendarterectomy, including patch graft, if performed; carotid, vertebral, subclavian, by neck incision	Yes	Yes	35390	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Cerebrovascular Interventions	Open Carotid Surgery	35390	Reoperation, carotid, thromboendarterectomy, more than 1 month after original operation (List separately to code for primary procedure)	Yes	Yes	35301	1/1/2024	1/1/2024	Active
				Carotid Stent						
Vascular Arterial Interventions	Cerebrovascular Interventions	Carotid Stent	37215	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; with distal embolic protection	Yes	Yes	37215 OR 37216 in addition to 37217 and 37218	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Cerebrovascular Interventions	Carotid Stent	37216	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; without distal embolic protection	Yes	Yes	37215 OR 37216 in addition to 37217 and 37218	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Cerebrovascular Interventions	Carotid Stent	37217	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery by retrograde treatment, open ipsilateral cervical carotid artery exposure, including angioplasty, when performed, and radiological supervision and interpretation	Yes	Yes	37215 OR 37216 in addition to 37217 and 37218	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Cerebrovascular Interventions	Carotid Stent	37218	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery, open or percutaneous antegrade approach, including angioplasty, when performed, and radiological supervision and interpretation	Yes	Yes	37215 OR 37216 in addition to 37217 and 37218	1/1/2024	1/1/2024	Active
			•	Vertebral Stent			1	1		
Vascular Arterial Interventions	Cerebrovascular Interventions	Vertebral Stent	0075T	Transcatheter placement of extracranial vertebral artery stent(s), including radiologic supervision and interpretation, open or percutaneous; initial vessel	Yes	Yes	0075T +/- 0076T	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Cerebrovascular Interventions	Vertebral Stent	0076T	Transcatheter placement of extracranial vertebral artery stent(s), including radiologic supervision and interpretation, open or percutaneous; each additional vessel (List separately in addition to code for primary procedure)	Yes	Yes	0075T +/- 0076T	1/1/2024	1/1/2024	Active
				Open Thoracic Aortic Surgery			1			
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Open Thoracic Aortic Surgery	33875	Descending thoracic aorta graft, with or without bypass	Yes	Yes	33875	1/1/2024	1/1/2024	Active
				Open Thoracoabdominal aneurysm repair						
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Open Thoracoabdominal aneurysm repair	33877	Repair of thoracoabdominal acrtic aneurysm with graft, with or without cardiopulmonary bypass	Yes	Yes	33877	1/1/2024	1/1/2024	Active
				Thoracic Endovascular Aneurysm Repair						
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33880	Endovascular repair of descending thoracic aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin	Yes	Yes	33880 or 33881	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33881	Endovascular repair of descending thoracic aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin	Yes	Yes	33880 OR 33881	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33883	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); initial extension	Yes	Yes	Can be billed in addition to 33880, 33881, 33884, 33886	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33884	Placement of proximal extension proxthesis for endovascular repair of descending thoracic aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); each additional proximal extension (List separately in addition to code for primary procedure)	Yes	Yes	Can be billed in addition to 33880, 33881, 33883, 33886	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33886	Placement of distal extension prosthesis(s) delayed after endovascular repair of descending thorack aorta	Yes	Yes	Can be billed in addition to 33881, 33883, 33884	1/1/2024	1/1/2024	Active

Product	Category	Grouping	CPT® Code	CPT* Code Description	Commercial Requires Prior Authorization	Medicare Requires Prior Authorization	Allowed Billing Groupings	Commercial Effective Date	Medicare Effective Date	Commercial Termed Date
				Endovascular Aorto Illac Aneurysm repair						
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34701	Endovascular repair of infrarenal aorta by deployment of an aorto-aortic tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the aortic fortunation, and all angioplassy/stending performed from the level of the renal arteries to the aortic fortunation of the process of th	Yes	Yes	34701 OR 34702 OR 34703 OR 34704 OR 34705 OR 34706	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34702	Endowscular repair of Infrarenal aorta by deployment of an aorta-aortic tube endograft including pre-procedure sizing and device selection, all nonelective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) blacked in the aorta from the level of the renal arteries to the aortic fubrication, and all angiopstay/starting reformed from the level of the renal arteries to the aortic fubrication, and all angiopstay/starting reformed from the level of the renal arteries to the aortic fubrication, and all angiopstay/starting reformed from the level of the renal arteries to the aortic fubrication, and all angiopstay/starting reformed from the level of the renal arteries to the aortic fubrication, and all angiopstay/starting reformed (eg. for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	Yes	Yes	34701 OR 34702 OR 34703 OR 34704 OR 34705 OR 34706	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34703	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-uni-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft entension(s) placed in the aorta from the level of the renal arteries to the liac bifurcation, and all angioplasty/sterning performed from the level of the renal arteries to the liac bifurcation, procedurancy many, pseudoanceymy, pseudoanceymy, pseudoanceymy, and an advanced processing user)	Yes	Yes	34701 OR 34702 OR 34703 OR 34704 OR 34705 OR 34706	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34704	Endowscular repair of Infrarenal sorts and/or illica retreyles) by deployment of an aorto-un-illac endografi including pre-procedure sixing and device selection, all nonselective catheterization(s), all associated radioplical suspervision and interpretation, all endograft extension(s) placed in the aort from the level of the result arteries to the like bifurcation, and all angiopsisty/stenting polyment of the result arteries to the like bifurcation, and/or like bifurcation or cultion, when performed (e.g., for aneurysm, pseudoaneurysm, dissection, penetrating uker, roumantic disruption)	Yes	Yes	34701 OR 34702 OR 34703 OR 34704 OR 34705 OR 34706	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34705	Endowscular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac endograft including preliprocedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft entension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/sterning performed from the level of the renal arteries to the liac bifurcation, procedurancy many, pseudoancymy, meadoancymy, meadoancymy, meadoancymy, meadoancymy, meadoancymy, and processing all angioplasty in the processing selection of the renal arteries to the liac bifurcation, for other than require (see 7 aneutym, pseudoancymy, meadoancymy, meado	Yes	Yes	34701 OR 34702 OR 34703 OR 34704 OR 34705 OR 34706	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34706	Endowscular repair of Infrarenti aorta and/or illac arteryles) by deployment of an aorto bi-liac endograft including preliprocedure sixing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aort from the level of the renal arteries to the illac bifurcation, and all angiopstixy/festing endograft extension(s) placed in the aort of illac bifurcation, and all angiopstixy/festing endograft extension occlusion, when performed (eg. for aneurysm, pseudoaneurysm, dissection, penetrating ulex, returnation disruption).	Yes	Yes	34701 OR 34702 OR 34703 OR 34704 OR 34705 OR 34706	1/1/2024	1/1/2024	Active
Vascular Arterial Intervention	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34709	Placement of extension prosthesis(es) distal to the common likac arterlyles) or proximal to the renal arterly(es) for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, dake aneurysm, dissection, penetrating ulcer, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplassy/tenting, when performed, per vessel treated (list separately in addition to code for primary procedure)	Yes	Yes		8/1/2025	8/1/2025	Active
Vascular Arterial Intervention	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34710	Delayed placement of distal or proximal extension prosthesis for endowascular repair of infrarenal abdominal anortic or like: a neurysm, false aneurysm, dissection, endoleak, or endograft migration, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed; initial vessel treated	Yes	Yes		8/1/2025	8/1/2025	Active
Vascular Arterial Intervention	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34711	Delayed placement of distal or proximal extension prosthesis for endowacular repair of Infrarenal abdominal anortic or Iliac aneurysm, false aneurysm, dissection, endoleak, or endograft migration, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/istenting, when performed, each additional vessel treated (List separately in addition to code for primary procedure)	Yes	Yes		8/1/2025	8/1/2025	Active
Vascular Arterial Intervention	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34712	Transcatheter delivery of enhanced fixation device(s) to the endograft (eg, anchor, screw, tack) and all associated radiological supervision and interpretation	Yes	Yes		8/1/2025	8/1/2025	Active
			•	Iliac aneurysm repair	*		*			,
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Iliac aneurysm repair	34707	Endowascular repair of Ilia: artery by deployment of an Ilio-Ilia: tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) or the aortic infurcation and distally to the Ilia: bifurcation, and treatment zone angioplasty/stenting, when performed, unilateral; for other than rupture (eg. for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation).	Yes	Yes	34708, 34717	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Iliac aneurysm repair	34708	Endovascular repair of like a ratery by deployment of an iko-like tube endograft including pre-procedure sizing and device selection, all inonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the index on out bifurcation and distully to the like bifurcation, and testment zone angioplassy/stenting, when performed, unlateral, for rupture including temporary acritical and/or like balloon occusion, when performed (e.g. for aneuryon, pseudomenuyon, dissection, serious malformation, traumatic disruption).	Yes	Yes	34707, 34717	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Iliac aneurysm repair	34717	Endovascular repair of Iliac artery at the time of aorto-liac artery endograft placement by deployment of an iliac branched endograft including pre-procedure sizing and device selection, all ipsilateral selective lilic artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external liliac, and common femoral artery(ies), and treatment lone anaploplasty/streating, when performed, for rupture or other than rupture (eg. for aneurym, pseudoaneurym, dissection, arteriovenous malformation, penetrating ulcer, traumatic disruption), unilateral (List separately in addition to code for primary procedure)	Yes	Yes	34707, 34708	1/1/2024	1/1/2024	Active

Product	Category	Grouping	CPT® Code	CPT® Code Description	Commercial Requires Prior Authorization	Medicare Requires Prior Authorization	Allowed Billing Groupings	Commercial Effective Date	Medicare Effective Date	Commercial Termed Date
				Fenestrated Endovascular Aortic Aneurysm Repair						
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34841	Endovascular repair of visceral aorta (eg., aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, cellac or renal artery)	Yes	Yes	34842, 34843, 34844, 34845, 34846, 34847, 34848	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34842	Endovascular repair of visceral aorta (eg. aneuryam, pseudoaneuryam, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angiological supervision produced in the pretation of the	Yes	Yes	34841, 34843, 34844, 34845, 34846, 34847, 34848	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34843	Endovascular repair of visceral aorta (eg. aneuryam, pseudoaneuryam, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endografi and all associated radiological supervision and interpretation, including target zone angiopiasty, when performed, including three visceral artery endoprostheses (superior mesenteric, celaz ang/or renal artery(s))	Yes	Yes	34841, 34842, 34844, 34845, 34846, 34847, 34848	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34844	Endovascular repair of visceral aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheess (superior mesenteric, ceilac and/or renal artery(s))		Yes	34841, 34842, 34843, 34845, 34846, 34847, 34848	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34845	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody in modular infrarenal aortic endograft and all associated redublinguists usery existencia, including target zone angiopiasty, when performed; including constituent and extra vendoprocrabusis (superior mesenteric, cellac or renal artery)	Yes	Yes	34841, 34842, 34843, 34844, 34846, 34847, 34848	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34846	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unbody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angiopiasty, when performed; including target zone angiopiasty, when performed; including target zone angiopiasty and the properties of the proper	Yes	Yes	34841, 34842, 34843, 34844, 34845, 34847, 34848	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34847	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angiopiasty, when performed; including the revisceral artery endoproschesse (culcular ordinarial artery[s])	Yes	Yes	34841, 34842, 34843, 34844, 34845, 34846, 34848	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34848	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and an all associated radiological supervision and interpretation, including toget zone angioplisity, when performed, including toget zone angioplisity, under pretation (excluding target zone angioplisity, when performed, including toget zone and artery(s))	Yes	Yes	34841, 34842, 34843, 34844, 34845, 34846, 34847	1/1/2024	1/1/2024	Active
				Iliac artery angioplasty/stent			•			
Vascular Arterial Interventions	Lower Extremity Interventions	Iliac artery angioplasty/stent	37220	Revascularization, endovascular, open or percutaneous, fliac artery, unllateral, initial vessel; with transluminal angioplasty	Yes	Yes	37220 OR 37221, 37222 can be billed in addition to either code, 37223 can be billed in conjunction with 37221 ONLY	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Iliac artery angioplasty/stent	37221	Revascularization, endovascular, open or percutaneous, lifac artery, unliateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	Yes	Yes	37220 OR 37221, 37222 can be billed in addition to either code, 37223 can be billed in conjunction with 37221 ONLY	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Iliac artery angioplasty/stent	37222	Revascularization, endovascular, open or percutaneous, lliac artery, each additional ipsilateral iliac vessel; with transluminal angioplasty (List separately in addition to code for primary procedure)	Yes	Yes	37220 OR 37221, 37222 can be billed in addition to either code, 37223 can be billed in conjunction with 37221 ONLY	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Iliac artery angioplasty/stent	37223	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	Yes	Yes	37220 OR 37221, 37222 can be billed in addition to either code, 37223 can be billed in conjunction with 37221 ONLY	1/1/2024	1/1/2024	Active

Product	Category	Grouping	CPT* Code	CPT® Code Description	Commercial Requires Prior Authorization	Medicare Requires Prior Authorization	Allowed Billing Groupings	Commercial Effective Date	Medicare Effective Date	Commercial Termed Date
				Femoral-popliteal artery angioplasty/stent						
Vascular Arterial Interventions	Lower Extremity Interventions	Femoral-popliteal artery angioplasty/stent	37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty	Yes	Yes	37726 or 37724	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Femoral-popliteal artery angioplasty/stent	37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	Yes	Yes	37724 or 37226	1/1/2024	1/1/2024	Active
Vascular Arterial	Lower Extremity Interventions	Femoral Popliteal Atherectomy	37225	Femoral Popliteal Atherectomy  Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed	Yes	Yes	37225 or 37227	1/1/2024	1/1/2024	Active
Interventions Vascular Arterial	Lower Extremity Interventions	Femoral Popliteal Atherectomy	37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when	Yes	Yes	37225 or 37227	1/1/2024	1/1/2024	Active
Interventions		, ,		performed  Iliac Artery Atherectomy			-	,,,	,,,	
Vascular Arterial Interventions	Lower Extremity Interventions	Iliac Artery Atherectomy	0238T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; iliac artery, each vessel	Yes	Yes		1/1/2024	1/1/2024	Active
				Tibial Arterial Interventions (LE)			T			
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unlateral, initial vessel; with transluminal angioplasty	Yes	Yes	37228 OR 37229 OR 37230 OR 37231 can be billed as a primary code. Up to two additional add on codes 37232, 37233, 37234, or 37235 can be billed along with the primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed	Yes	Yes	37228 OR 37229 OR 37230 OR 37231 can be billed as a primary code. Up to two additional add on codes 37232, 37233, 37234, or 37235 can be billed along with the primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	Yes	Yes	37228 OR 37229 OR 37230 OR 37231 can be billed as a primary code. Up to two additional add on codes 37232, 37233, 37234, or 37235 can be billed along with the primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	Yes	Yes	37228 OR 37229 OR 37230 OR 37231	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37232	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal angioplasty (List separately in addition to code for primary procedure)	Yes	Yes	37228 OR 37229 OR 37231 can be billed as a primary code. Up to two additional add on codes 37232, 37233, 37234, or 37235 can be billed along with the primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37233	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with atherectomy, includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	Yes	Yes	37228 OR 37229 OR 37230 OR 37231 can be billed as a primary code. Up to two additional add on codes 37232, 37233, 37234, or 37235 can be billed along with the primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37234	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	Yes	Yes	37228 OR 37229 OR 37230 OR 37231 can be billed as a primary code. Up to two additional add on codes 37232, 37233, 37234, or 37235 can be billed along with the primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37235	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	Yes	Yes	37228 OR 37229 OR 37230 OR 37231 can be billed as a primary code. Up to two additional add on codes 37232, 37233, 37234, or 37235 can be billed along with the primary code.	1/1/2024	1/1/2024	Active

Product	Category	Grouping	CPT® Code	CPT* Code Description	Commercial Requires Prior Authorization	Medicare Requires Prior Authorization	Allowed Billing Groupings	Commercial Effective Date	Medicare Effective Date	Commercial Termed Date
				Endovenous Ablation						
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36473	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively- Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36474	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively- Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36475	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively- Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36476	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency, second and subsequent veins treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively- Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36478	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively— Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36479	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; second and subsequent veins treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively- Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg. cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively- Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Endovenous Ablation	36483	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg. cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Yes	Yes	36473 OR 36475 OR 36478 OR 36482 in addition to 36474, 36476, 36479, OR 36483 respectively— Max of 1 primary code and one add one	1/1/2024	1/1/2024	Active

Product	Category	Grouping	CPT® Code	CPT* Code Description  Sderotherapy of Truncal Veins	Commercial Requires Prior Authorization	Medicare Requires Prior Authorization	Allowed Billing Groupings	Commercial Effective Date	Medicare Effective Date	Commercial Termed Date
Vascular Venous Interventions	Venous Interventions	Sclerotherapy of Truncal Veins	36465	Injection of non-compounded foam scierosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all maging guidance and monitoring; single incompetent extremity truncal vein (eg. great saphenous vein, accessory saphenous vein)	Yes	Yes	36465 OR 36466	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Sclerotherapy of Truncal Veins	36466	Injection of non-compounded foam sclerosant with ultrasound compression manueurs to guide dispersion of the injection, including guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg	Yes	Yes	36465 OR 36466	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Sclerotherapy of Veins	36468	Injection(s) of sclerosant for spider veins (telangiectasia), limb or trunk	Yes	Yes	36468 OR 36470 OR 36471	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Sclerotherapy of Veins	36470	Injection(s) of sclerosant; single incompetent vein (other than telangiectasia)	Yes	Yes	36468 OR 36470 OR 36471	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Sclerotherapy of Veins	36471	Injection(s) of sclerosant; multiple incompetent veins (other than telangiectasia), same leg	Yes	Yes	36468 OR 36470 OR 36471	1/1/2024	1/1/2024	Active
Vascular Venous		Open Treatment of Perforator		Open Treatment of Perforator Veins			37700 OR 37760 OR		. /. /	
Interventions Vascular Venous	Venous Interventions	Veins Open Treatment of Perforator	37500 37760	Vascular endoscopy, surgical, with ligation of perforator veins, subfascial (SEPS)	Yes	Yes	37761 37700 OR 37760 OR	1/1/2024	1/1/2024	Active
Interventions Vascular Venous	Venous Interventions	Veins Open Treatment of Perforator	37761	Ligation of perforator veins, subfascial, radical (Linton type), including skin graft, when performed, open, 1 leg	Yes	Yes	37761 37700 OR 37760 OR	1/1/2024	1/1/2024	Active
Interventions	Venous Interventions	Veins	37761	Ligation of perforator vein(s), subfascial, open, including ultrasound guidance, when performed, 1 leg  High Ligation and Stripping of Saphenous veins	Yes	Yes	37761	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	High Ligation and Stripping of Saphenous veins	37700	Ligation and division long saphenous vein at saphenofemoral junction, or distal interruptions	Yes	Yes	37700 OR 37718 OR 37722 OR 37735 OR 37780	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	High Ligation and Stripping of Saphenous veins	37718	Ligation, division, and stripping, short saphenous vein	Yes	Yes	37700 OR 37718 OR 37722 OR 37735 OR 37780	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	High Ligation and Stripping of Saphenous veins	37722	Ligation, division, and stripping, long (greater) saphenous veins from saphenofemoral junction to knee or below	Yes	Yes	37700 OR 37718 OR 37722 OR 37735 OR 37780	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	High Ligation and Stripping of Saphenous veins	37735	Ligation and division and complete stripping of long or short saphenous veins with radical excision of ulcer and skin graft and/or interruption of communicating veins of lower leg with excision of deep fascial	Yes	Yes	37700 OR 37718 OR 37722 OR 37735 OR 37780	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	High Ligation and Stripping of Saphenous veins	37780	Ligation and division of short saphenous vein at saphenopopliteal junction (separate procedure)	Yes	Yes	37700 OR 37718 OR 37722 OR 37735 OR 37780	1/1/2024	1/1/2024	Active
Vascular Venous				Phlebectomy			37765 OR 37766 OR			
Interventions  Vascular Venous	Venous Interventions	Phlebectomy	37765	Stab phiebectomy of varicose veins, 1 extremity; 10-20 stab incisions	Yes	Yes	37765 OR 37766 OR	1/1/2024	1/1/2024	Active
Interventions	Venous Interventions	Phlebectomy	37766	Stab philebectomy of varicose veins, 1 extremity; more than 20 incisions	Yes	Yes	37799 OR 33785	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Phlebectomy	33779	Unlisted code, arteries and veins (Typically used for stab phlebectomy, <10 incisions)	Yes	Yes	37765 OR 37766 OR 37799 OR 33785	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Phlebectomy	37785	Ligation, division, and/or excision of varicose vein cluster(s), 1 leg	Yes	Yes	37765 OR 37766 OR 37799 OR 33785	1/1/2024	1/1/2024	Active
				Venous - General						
Vascular Arterial Interventions	Venous Interventions	Venous stenting	37238	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; initial vein	Yes	Yes	37236 OR 37246. 37239 and 37249 are add-on codes which must be billed with a primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Venous Interventions	Venous stenting	37239	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; each additional vein (List separately in addition to code for primary procedure)	Yes	Yes	37238 OR 37248. 37239 and 37249 are add-on codes which must be billed with a primary code.	1/1/2024	1/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Venous stenting	37248	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein, initial vein	Yes	Yes	37238 OR 37248. 37239 and 37249 are add-on codes which must be billed with a primary code.	6/1/2024	6/1/2024	Active
Vascular Venous Interventions	Venous Interventions	Venous stenting	37249	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; each additional vein (list separately in addition to code for primary procedure)	Yes	Yes	37238 OR 37248. 37239 and 37249 are add-on codes which must be billed with a primary code.	6/1/2024	6/1/2024	Active
				Arterial - General			37236 OR 37246.			
Vascular Arterial Interventions	Non-Lower Extremity	Visceral Artery Interventions	37236	Transcatheter placement of an intravascular stent(s) (except lower extremity artery(s) for occlusive disease, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel, when performed; initial artery	Yes	Yes	37237 and 37247 are add-on codes which must be billed with a primary code.	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Non-Lower Extremity	Visceral Artery Interventions	37237	Transcatheter placement of an intravascular stent(s) (except lower extremity artery(s) for occlusive disease, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel, when performed; each additional artery (List separately in addition to code for primary rocedure)	Yes	Yes	37236, 37246, 37247	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Non-Lower Extremity	Visceral Artery Interventions	37246	Transluminal balloon angioplasty (except lower extremity artery(ies) for occlusive disease, intracranial, coronary, pulmonary, or dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same artery; initial artery	Yes	Yes	37236, 37237, 37247	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Non-Lower Extremity	Visceral Artery Interventions	37247	Transluminal balloon angioplasty (except lower extremity artery(ies) for occlusive disease, intracranial, coronary, pulmonary, or dishysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same artery; each additional artery (List separately in addition to code for primary procedure)	Yes	Yes	37236, 37237, 37246	1/1/2024	1/1/2024	Active
Vascular Arterial	Intravascular Ultrasound	Intravascular Ultrasound	37252	Intravascular ultrasound (noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation; initial noncoronary vessel (List separately in	Yes	Yes	37252 +/- 37253	1/1/2024	1/1/2024	Active
Interventions Vascular Arterial	(IVUS) Intravascular Ultrasound	Intravascular Ultrasound	37253	addition to code for primary procedure) Intravascular ultrasound (noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation; each additional noncoronary vessel (List	Yes	Yes	37252 +/- 37253	1/1/2024	1/1/2024	Active
Interventions	(IVUS)			separately in addition to code for primary procedure)				-,-,	-7 -7	

Product	Category	Grouping	CPT® Code	CPT® Code Description	Commercial Requires Prior Authorization	Medicare Requires Prior Authorization	Allowed Billing Groupings	Commercial Effective Date	Medicare Effective Date	Commercial Termed Date
				Iliac aneurysm repair						
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Iliac aneurysm repair	34718	Endouscular repair of like artery, not associated with placement of an anotro-like artery endograft at the same session, by deployment of an like branched endograft, including pre-procedure string and device selection, by liquiding large like large year the stratantion [s.] all associated andiological suspension and interpretation, and all endograft extension(s) proximally be the eartic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for other than rupture (eg. for aneurysm, pseudoaneurysm, dissection, arteriorenosous malformation), penetrating (use), "uniteral"	Yes	Yes	34718	1/1/2024	1/1/2024	Active
				Investigational/Experimental						
Vascular Arterial Interventions	Non-Lower Extremity	Investigational / Experimental	0234T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; renal artery	Yes	Yes	0234T	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Non-Lower Extremity	Investigational / Experimental	0235T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; visceral artery (except renal), each vessel	Yes	Yes	0235T	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Non-Lower Extremity	Investigational / Experimental	0236T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; abdominal aorta	Yes	Yes	0236T	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Non-Lower Extremity	Investigational / Experimental	0237T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; brachiocephalic trunk and branches, each vessel	Yes	Yes	0237T	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	0505T	Endovenous femoral-popliteal arterial revascularization, with transcatheter placement of intravascular stent grafts) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated radiological supervision and interpretation, when performed, with crossing of the occlusive lesion in an estraluminal fashion	Yes	Yes	0505T	1/1/2024	1/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9764	Revascularization, endovascular, open or percutaneous, lower extremity artery(les), except tiblal/peroneal; with intravascular lithotripsy, includes angioplasty within the same vessel(s), when performed	Yes	Yes	C9765, C9766, C9767	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9765	Revascularization, endovascular, open or percutaneous, lower extremity artery(ies), except tibial/peroneal; with intravascular lithotripsy, and transluminal stent placement(s), includes angioplasty within the same vessel(s), when performed	Yes	Yes	C9764, C9766, C9767	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9766	Revascularization, endovascular, open or percutaneous, lower extremity artery(les), except tiblal/peroneal; with intravascular lithotripsy and atherectomy, includes angioplasty within the same vessel(s), when performed	Yes	Yes	C9764, C9765, C9767	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9767	Revascularization, endovascular, open or percutaneous, lower extremity artery(les), except tiblal/peroneal; with intravascular lithotripsy and transluminal stent placement(s), and atherectomy, includes angioplasty within the same vessel(s), when performed	Yes	Yes	C9764, C9765, C9766	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9772	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(les), with intravascular lithotripsy, includes angioplasty within the same vessel(s), when performed	Yes	Yes	C9773, C9774	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9773	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(les); with intravascular lithotripsy, and transluminal stent placement(s), includes angioplasty within the same vessel(s), when performed	Yes	Yes	C9772, C9774	6/1/2024	6/1/2024	Active
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9774	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(ies); with intravascular lithotripsy and atherectomy, includes angioplasty within the same vessel(s), when performed	Yes	Yes	C9772, C9773	6/1/2024	6/1/2024	Active
				Venous Embolization						
Vascular Venous Interventions	Vascular Embolization	Venous Embolization	37241	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; venous, other than hemorrhage (eg. congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles)	Yes	Yes	37241	8/1/2024	8/1/2024	Active
				Arterial Embolization						
Vascular Venous Interventions	Vascular Embolization	Arterial Embolization	37242	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; arterial, other than hemorrhage or tumor (eg. congenital or acquired arterial malformations, arteriovenous malformations, arteriovenous fistulas, aneurysms, pseudoaneurysms)	Yes	Yes	37242	8/1/2024	8/1/2024	Active
				Tumor Embolization						
Vascular Venous Interventions	Vascular Embolization	Arterial Embolization	37243	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for tumors, organ ischemia, or infarction.	Yes	Yes	37243	8/1/2024	8/1/2024	Active
				Extravasation Embolization						
Vascular Venous Interventions	Vascular Embolization	Extravasation Embolization	37244	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for arterial or venous hemorrhage or lymphatic extravasation	Yes	Yes	37244	8/1/2024	8/1/2024	Active

CPT copyright 2025 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.