



## Zing Health Prior Authorization Procedure List: Vascular Intervention Codes

Product	Category	Grouping	CPT® Code	CPT® Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective 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	61635	2/1/2025
Vascular Arterial Interventions	Cerebrovascular Interventions	Intracranial interventions	61630	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous	Yes	61630	2/1/2025
Vascular Arterial Interventions	Cerebrovascular Interventions	Intracranial interventions	61635	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angioplasty, if performed	Yes	61624	2/1/2025
				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	35390	2/1/2025
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	35301	2/1/2025
				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	37216	2/1/2025
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	37215	2/1/2025
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	37218	2/1/2025
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	37217	2/1/2025
				Vertebral Stent			
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	0076T	2/1/2025
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	0075T	2/1/2025

Product	Category	Grouping	CPT® Code	CPT® Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date		
Open Thoracic Aortic Surgery									
Cardiology	Aortic Dissection/Aneurysm Repair	Open Thoracic Aortic Surgery	33875	Descending thoracic aorta graft, with or without bypass	Yes	33875	2/1/2025		
				Open Thoracoabdominal aneurysm repair					
Cardiology	Aortic Dissection/Aneurysm Repair	Open Thoracoabdominal aneurysm repair	33877	Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass	Yes	33877	2/1/2025		
				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	33881	2/1/2025		
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	33880	2/1/2025		
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	33880, 33881, 33884, 33886	2/1/2025		
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33884	Placement of proximal extension prosthesis 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	33880, 33881, 33883, 33886	2/1/2025		
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33886	Placement of distal extension prosthesis(s) delayed after endovascular repair of descending thoracic aorta	Yes	33880, 33881, 33883, 33884	2/1/2025		
				Endovascular Aorto Iliac 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 bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	Yes	34702, 34703, 34704 34705	2/1/2025		
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34702	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 bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	Yes	34701, 34703, 34704 34705	2/1/2025		
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 extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg. for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	Yes	34701, 34702, 34704 34705	2/1/2025		
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34704	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 extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (e.g., for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	Yes	34701, 34702, 34703 34705	2/1/2025		

Product	Category	Grouping	CPT® Code	CPT® Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34705	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac 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 iliac bifurcation, and all ungioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg. for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	Yes	34701, 34702, 34703, 34704	2/1/2025
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34706	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac 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 iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	Yes	34701, 34702, 34703, 34704, 34705	2/1/2025
Vascular Arterial Intervention	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34709	Placement of extension prosthesis(es) distal to the common iliac artery(ies) or proximal to the renal artery(ies) for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, dissection, penetrating ulcer, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed, per vessel treated (List separately in addition to code for primary procedure)	Yes		8/1/2025
Vascular Arterial Intervention	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34710	Delayed placement of distal or proximal extension prosthesis for endovascular repair of infrarenal abdominal aortic 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/stenting, when performed; initial vessel treated	Yes		8/1/2025
Vascular Arterial Intervention	Aortic Dissection/Aneurysm Repair	Endovascular Aorto Iliac Aneurysm repair	34711	Delayed placement of distal or proximal extension prosthesis for endovascular repair of infrarenal abdominal aortic 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/stenting, when performed; each additional vessel treated (List separately in addition to code for primary procedure)	Yes		8/1/2025
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		8/1/2025
				lliac aneurysm repair			
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	lliac aneurysm repair	34707	Endovascular repair of iliac artery by deployment of an ilio-iliac tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally to the iliac bifurcation, and treatment zone angioplasty/stenting, when performed, unilateral; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation)	Yes	34708, 34717	2/1/2025
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Iliac aneurysm repair	34708	Endovascular repair of iliac artery by deployment of an ilio-iliac tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally to the iliac bifurcation, and treatment zone angioplasty/stenting, when performed, unilateral; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, traumatic disruption)	Yes	34707, 34717	2/1/2025
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	lliac aneurysm repair	34717	Endovascular repair of iliac artery at the time of aorto-iliac artery endograft placement by deployment of an iliac branched endograft including pre-procedure sizing and device selection, all ipsilateral selective iliac 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 iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for rupture or other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer, traumatic disruption), unilateral (List separately in addition to code for primary procedure)	Yes	34707, 34708	2/1/2025

Product	Category	Grouping	CPT® Code	CPT® Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective 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, celiac or renal artery)	Yes	34842, 34843, 34844, 34845, 34846, 34847, 34848	2/1/2025
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34842	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 two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))	Yes	34841, 34843, 34844, 34845, 34846, 34847, 34848	2/1/2025
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Fenestrated Endovascular Aortic Aneurysm Repair	34843	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 three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Yes	34841, 34842, 34844, 34845, 34846, 34847, 34848	2/1/2025
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 endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Yes	34841, 34842, 34843, 34845, 34846, 34847, 34848	2/1/2025
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 or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)	Yes	34841, 34842, 34843, 34844, 34846, 34847, 34848	2/1/2025
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 unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Yes	34841, 34842, 34843, 34844, 34845, 34847, 34848	2/1/2025
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 angioplasty, when performed; including three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))	Yes	34841, 34842, 34843, 34844, 34845, 34846, 34848	2/1/2025
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 all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Yes	34841, 34842, 34843, 34844, 34845, 34846, 34847	2/1/2025

Product	Category	Grouping	CPT® Code	CPT* Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date
				Iliac artery angioplasty/stent			
Vascular Arterial Interventions	Lower Extremity Interventions	lliac artery angioplasty/stent	37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty	Yes	37221	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	lliac artery angioplasty/stent	37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	Yes	37220, 37224, 37226, 37228	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	lliac artery angioplasty/stent	37222	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal angioplasty (List separately in addition to code for primary procedure)	Yes	37220, 37221, 37223	2/1/2025
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	37220, 37221, 37222	2/1/2025
				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	37726	2/1/2025
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	37724	2/1/2025
				Femoral Popliteal Atherectomy			
Vascular Arterial Interventions	Lower Extremity Interventions	Femoral Popliteal Atherectomy	37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed	Yes	37226, 37727	2/1/2025
Vascular Arterial Interventions	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 performed	Yes	37225, 37226, 0238T, 37721, 37720, 37228, 37229, 37230, 37231	2/1/2025
				Iliac Artery Atherectomy			2/1/2025
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	37721, 37720	2/1/2025

Product	Category	Grouping	CPT® Code	CPT® Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date
				Tibial Arterial Interventions (LE)			2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	Tibial Arterial Interventions (LE)	37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty	Yes	37230	2/1/2025
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	37231, 37230, 37229, 37228	2/1/2025
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	37228	2/1/2025
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	37229, 37728, 37230	2/1/2025
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	37228, 37229, 37230, 37231, 37233, 37234, 37235	2/1/2025
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	37228, 37229, 37230, 37231, 37232, 37234, 37235	2/1/2025
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	37228, 37229, 37230, 37231, 37232, 37233, 37235	2/1/2025
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	37228, 37229, 37230, 37231, 37232, 37233, 37234	2/1/2025
				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	36475, 36465,36478,364 82	2/1/2025
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	36473, 36475, 36476, 36478, 36479, 36482, 36483	2/1/2025
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	36473, 36478, 36482, 36465	2/1/2025
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	36473, 36474, 36475, 36478, 36479, 36482, 36483	2/1/2025
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	36475, 36482,36465,364 73	2/1/2025
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	36473, 36474, 36475, 36476, 36478, 36482, 36483	2/1/2025
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	36465	2/1/2025
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	36473, 36474, 36475, 36476, 36478, 36479, 36482	2/1/2025

Product	Category	Grouping	CPT® Code	CPT® Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date
				Sclerotherapy of Truncal Veins			
Vascular Venous Interventions	Venous Interventions	Sclerotherapy of Truncal Veins	36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (eg, great saphenous vein, accessory saphenous vein)	Yes	36466	2/1/2025
Vascular Venous Interventions	Venous Interventions	Sclerotherapy of Truncal Veins	36466	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg	Yes	36471	2/1/2025
				Sclerotherapy of Veins			
Cardiology	Venous Interventions	Sclerotherapy of Veins	36468	Injection(s) of sclerosant for spider veins (telangiectasia), limb or trunk	Yes	36470, 36471	2/1/2025
Cardiology	Venous Interventions	Sclerotherapy of Veins	36470	Injection(s) of sclerosant; single incompetent vein (other than telangiectasia)	Yes	36471	2/1/2025
Cardiology	Venous Interventions	Sclerotherapy of Veins	36471	Injection(s) of sclerosant; multiple incompetent veins (other than telangiectasia), same leg	Yes	36470	2/1/2025
				Open Treatment of Perforator Veins			
Vascular Venous Interventions	Venous Interventions	Open Treatment of Perforator Veins	37500	Vascular endoscopy, surgical, with ligation of perforator veins, subfascial (SEPS)	Yes	37760, 37761	2/1/2025
Vascular Venous Interventions	Venous Interventions	Open Treatment of Perforator Veins	37760	Ligation of perforator veins, subfascial, radical (Linton type), including skin graft, when performed, open, $1\mathrm{leg}$	Yes	37700	2/1/2025
Vascular Venous Interventions	Venous Interventions	Open Treatment of Perforator Veins	37761	Ligation of perforator vein(s), subfascial, open, including ultrasound guidance, when performed, 1 leg	Yes	37760	2/1/2025
				High Ligation and Stripping of Saphenous veins			
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	37718, 37722, 37735, 37780	2/1/2025
Vascular Venous Interventions	Venous Interventions	High Ligation and Stripping of Saphenous veins	37718	Ligation, division, and stripping, short saphenous vein	Yes	37700, 37722, 37735, 37780	2/1/2025
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	37700, 37718, 37735, 37780	2/1/2025
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 fascia	Yes	37718, 37722	2/1/2025
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	37700, 37718, 37722, 37735	2/1/2025

Product	Category	Grouping	CPT® Code	CPT* Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date
				Phlebectomy			
Vascular Venous Interventions	Venous Interventions	Phlebectomy	37765	Stab phlebectomy of varicose veins, 1 extremity; 10-20 stab incisions	Yes	37766	2/1/2025
Vascular Venous Interventions	Venous Interventions	Phlebectomy	37766	Stab phlebectomy of varicose veins, 1 extremity; more than 20 incisions	Yes	37765	2/1/2025
Vascular Venous Interventions	Venous Interventions	Phlebectomy	37785	Ligation, division, and/or excision of varicose vein cluster(s), 1 leg	Yes	37765, 37766, 37799	2/1/2025
				Venous - General			
Cardiology	Non-Lower Extremity	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	37239, 37248, 37249	2/1/2025
Cardiology	Non-Lower Extremity	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	37238, 37248, 37249	2/1/2025
Vascular Venous Interventions	Non-Lower Extremity	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	37236	2/1/2025
Vascular Venous Interventions	Non-Lower Extremity	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	37238, 37239, 37248	2/1/2025
				Arterial - General			
Vascular Arterial Interventions	Venous Interventions	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	37237, 37246, 37247	2/1/2025
Vascular Arterial Interventions	Venous Interventions	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 procedure)	Yes	37236, 37246, 37247	2/1/2025
Vascular Venous Interventions	Venous Interventions	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	37236, 37237, 37247	2/1/2025
Vascular Venous Interventions	Venous Interventions	Visceral Artery Interventions	37247	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; each additional artery (List separately in addition to code for primary procedure)	Yes	37236, 37237, 37246	2/1/2025
				Intravascular Ultrasound			
Vascular Arterial Interventions	Intravascular Ultrasound (IVUS)	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 addition to code for primary procedure)	Yes	37253	2/1/2025
Vascular Arterial Interventions	Intravascular Ultrasound (IVUS)	Intravascular Ultrasound	37253	Intravascular ultrasound (noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation; each additional noncoronary vessel (List separately in addition to code for primary procedure)	Yes	37252	2/1/2025

Product	Category	Grouping	CPT® Code	CPT* Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date
				Iliac aneurysm repair			
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	lliac aneurysm repair	34718	Endovascular repair of iliac artery, not associated with placement of an aorto-iliac artery endograft at the same session, by deployment of an iliac branched endograft, including pre-procedure sizing and device selection, all ipsilateral selective iliac 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 iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer), unilateral	Yes	34718	2/1/2025
				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	0234T	2/1/2025
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	0235T	2/1/2025
Vascular Arterial Interventions	Non-Lower Extremity	Investigational / Experimental	0236T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; abdominal aorta	Yes	0236T	2/1/2025
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	0237T	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	0505T	Endovenous femoral-popliteal arterial revascularization, with transcatheter placement of intravascular stent graft(s) 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 extraluminal fashion	Yes	0505T	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9764	Revascularization, endovascular, open or percutaneous, lower extremity artery(ies), except tibial/peroneal; with intravascular lithotripsy, includes angioplasty within the same vessel(s), when performed	Yes	C9765, C9766, C9767	2/1/2025
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	C9764, C9766, C9767	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9766	Revascularization, endovascular, open or percutaneous, lower extremity artery(ies), except tibial/peroneal; with intravascular lithotripsy and atherectomy, includes angioplasty within the same vessel(s), when performed	Yes	C9764, C9765, C9767	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9767	Revascularization, endovascular, open or percutaneous, lower extremity artery(ies), except tibial/peroneal; with intravascular lithotripsy and transluminal stent placement(s), and atherectomy, includes angioplasty within the same vessel(s), when performed	Yes	C9764, C9765, C9766	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9772	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(ies), with intravascular lithotripsy, includes angioplasty within the same vessel(s), when performed	Yes	C9773, C9774	2/1/2025
Vascular Arterial Interventions	Lower Extremity Interventions	Investigational / Experimental	C9773	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(ies); with intravascular lithotripsy, and transluminal stent placement(s), includes angioplasty within the same vessel(s), when performed	Yes	C9772, C9774	2/1/2025
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	C9772, C9773	2/1/2025
				Venous Embolization			
Vascular Venous Interventions	Venous 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	37241	2/1/2025
				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	37242	2/1/2025

Product	Category	Grouping	CPT® Code	CPT® Code Description	Medicare Requires Prior Authorization	Allowed Billing Groupings	Medicare Effective Date		
	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	37243	2/1/2025		
				Extravasation Embolization					
Vascular Venous Interventions	Vascular Embolization	Extravasation Embolization		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	37244	2/1/2025		

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