

**HealthFirst**  
**Prior Authorization Procedure List: Radiation Oncology**

CPT® Code	CPT® Code Description	Commercial, Medicaid, CHP, FHP: Requires Prior Authorization	Medicare: Requires Prior Authorization
<b>Associated Service with Radiation Therapy</b>			
77436	Surface radiation therapy; superficial or orthovoltage, treatment planning and simulation-aided field setting	Yes	Yes
<b>Brachytherapy</b>			
0394T	HDR electronic brachytherapy, skin surface application, per fraction	Yes	Yes
0395T	HDR electronic brachytherapy, interstitial or intracavitary treatment, per fraction	Yes	Yes
77761	Intracavitary radiation source application; simple	Yes	Yes
77762	Intracavitary radiation source application; intermediate	Yes	Yes
77767	HDR radionuclide skin surface brachytherapy; lesion diameter up to 2.0 cm or 1 channel	Yes	Yes
77768	HDR radionuclide skin surface brachytherapy; lesion diameter over 2.0 cm and 2 or more channels, or multiple lesions	Yes	Yes
77770	HDR radionuclide interstitial or intracavitary brachytherapy; 1 channel	Yes	Yes
77771	HDR radionuclide rate interstitial or intracavitary brachytherapy; 2 to 12 channels	Yes	Yes
77772	HDR radionuclide interstitial or intracavitary brachytherapy; over 12 channels	Yes	Yes
77763	Intracavitary radiation source application; complex	Yes	Yes
77778	Interstitial radiation source application, complex, includes supervision, handling, loading of radiation source when performed	Yes	Yes
77789	Surface application of low dose rate radionuclide source		
G0458	Low dose rate (LDR) prostate brachytherapy services, composite rate		
<b>Cardiac Focal Ablation</b>			
0747T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; delivery of radiation therapy, arrhythmia		

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<b>Stereotactic Radiation Therapy</b>			
77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based	Yes	Yes
77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based	Yes	Yes
77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	Yes	Yes
G0339	Image guided robotic linear accelerator-based stereotactic radiosurgery, complete course of therapy in one session or first session of fractionated treatment	Yes	Yes
G0340	Image guided robotic linear accelerator-based stereotactic radiosurgery, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session, second through fifth sessions, maximum 5 sessions per course of treatment	Yes	Yes
<b>Intensity Modulated Radiation Therapy (IMRT)</b>			
77385	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple	Yes	Yes
77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	Yes	Yes
G6015	Intensity modulated treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic mlc, per treatment session	Yes	Yes
<b>Neutron Beam Radiation Therapy</b>			
77423	High energy neutron radiation treatment delivery; 1 or more isocenter(s) with coplanar or non-coplanar geometry with blocking and/or wedge, and/or compensator(s)	Yes	Yes
<b>Intraoperative Radiation Therapy (IORT)</b>			
77424	Intraoperative radiation treatment delivery, x-ray, single treatment session	Yes	Yes
77425	Intraoperative radiation treatment delivery, electrons, single treatment session	Yes	Yes
<b>Proton Beam Radiation Therapy</b>			
77520	Proton treatment delivery; simple, without compensation	Yes	Yes
77522	Proton treatment delivery; simple, with compensation	Yes	Yes
77523	Proton treatment delivery; intermediate	Yes	Yes
77525	Proton treatment delivery; complex	Yes	Yes

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<b>Hyperthermia Treatment</b>			
<b>77600</b>	Hyperthermia, externally generated; superficial (ie, heating to a depth of 4 cm or less)	Yes	Yes
<b>77605</b>	Hyperthermia, externally generated; deep (ie, heating to depths greater than 4 cm)	Yes	Yes
<b>77610</b>	Hyperthermia generated by interstitial probe(s); 5 or fewer interstitial applicators	Yes	Yes
<b>77615</b>	Hyperthermia generated by interstitial probe(s); more than 5 interstitial applicators	Yes	Yes
<b>77620</b>	Hyperthermia generated by intracavitory probe(s)	Yes	Yes
<b>Radiation Treatment Delivery</b>			
<b>77401</b>	Radiation treatment delivery, superficial and/or ortho voltage, per day	Yes	Yes
<b>77402</b>	Radiation treatment delivery; Level 1 (eg, single-electron field, multiple-electron fields, or 2D photons), including imaging guidance, when performed	Yes	Yes
<b>77407</b>	Radiation treatment delivery; Level 2, single-isocenter (eg, 3D or IMRT), photons, including imaging guidance, when performed	Yes	Yes
<b>77412</b>	Radiation treatment delivery; Level 3, multiple isocenters with photon therapy (eg, 2D, 3D, or IMRT) or a single-isocenter photon therapy (eg, 3D or IMRT) with active motion management, or total skin electrons, or mixed-electron/photon field(s), including imaging guidance, when performed	Yes	Yes
<b>77437</b>	Surface radiation therapy; superficial, delivery, =150 kV, per fraction (eg, electronic brachytherapy)	Yes	Yes
<b>77438</b>	Surface radiation therapy; orthovoltage, delivery, >150-500 kV, per fraction	Yes	Yes
<b>77439</b>	Surface radiation therapy; superficial or orthovoltage, image guidance, ultrasound for placement of radiation therapy fields for treatment of cutaneous tumors, per course of treatment (List separately in addition to code for primary procedure)	Yes	Yes
<b>G6003</b>	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5mev	Yes	Yes
<b>G6004</b>	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 6-10mev	Yes	Yes
<b>G6005</b>	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 11-19mev	Yes	Yes
<b>G6006</b>	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 20mev or greater	Yes	Yes

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<b>G6007</b>	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: up to 5mev	Yes	Yes
<b>G6008</b>	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 6-10mev	Yes	Yes
<b>G6009</b>	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 11-19mev	Yes	Yes
<b>G6010</b>	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 20 mev or greater	Yes	Yes
<b>G6011</b>	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 5mev	Yes	Yes
<b>G6012</b>	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10mev	Yes	Yes
<b>G6013</b>	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19mev	Yes	Yes
<b>G6014</b>	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20mev or greater	Yes	Yes

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<b>Image-Guided Radiation (IGRT)</b>			
<b>77014</b>	Computed tomography guidance for placement of radiation therapy fields	Yes	Yes
<b>77387</b>	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed	Yes	Yes
<b>G6001</b>	Ultrasonic guidance for placement of radiation therapy fields	Yes	Yes
<b>G6002</b>	Stereoscopic x-ray guidance for localization of target volume for the delivery of radiation therapy	Yes	Yes
<b>Therapeutic Radiopharmaceuticals</b>			
<b>77750</b>	Infusion or instillation of radioelement solution (includes 3-month follow-up care)	Yes	Yes
<b>79005</b>	Radiopharmaceutical therapy, by oral administration; used for I-131 treatment	Yes	Yes
<b>79101</b>	Radiopharmaceutical, therapy, by intravenous administration	Yes	Yes
<b>79403</b>	Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion	Yes	Yes
<b>A9513</b>	Lutetium Lu 177, dotatate, therapeutic, 1 mCi	Yes	Yes
<b>A9543</b>	Yttrium 90 Ibritumomab Tiuxetan (Zevalin)	Yes	Yes
<b>A9606</b>	Radium RA-223 dichloride, therapeutic, per microcurie (Xofigo)	Yes	Yes
<b>A9607</b>	Lutetium Lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie		
<b>A9590</b>	Iodine i-131, iobenguane, 1 millicurie	Yes	Yes
<b>A9699</b>	Radiopharmaceutical, therapeutic, not otherwise classified	Yes	Yes
<b>C2616</b>	Brachytherapy source, nonstranded, yttrium-90, per source		
<b>S2095</b>	Transcatheter occlusion or embolization for tumor destruction, percutaneous, any method, using yttrium-90 microspheres		

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