

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	Medicare 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), including all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention, percutaneous, any method; central nervous system (intracranial, spinal cord)	Yes	Yes	61635	6/1/2024	6/1/2024	Active	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	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	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	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	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	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	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	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	Active
Vertebral Stent											
Vascular Arterial Interventions	Cerebrovascular Interventions	Vertebral Stent	00757	Transcatheter placement of extracranial vertebral artery stent(s), including radiologic supervision and interpretation, open or percutaneous; initial vessel	Yes	Yes	00757 +/- 0076T	1/1/2024	1/1/2024	Active	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	00757 +/- 0076T	1/1/2024	1/1/2024	Active	Active
Open Thoracic Aortic Surgery											
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	Active
Open Thoracoabdominal aneurysm repair											
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Open Thoracoabdominal aneurysm repair	33877	Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass	Yes	Yes	33877	1/1/2024	1/1/2024	Active	Active
Thoracic Endovascular Aneurysm Repair											
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33880	Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft covering the left subclavian artery and all aortic tube endograft extension(s) proximally in the aortic arch and ascending aorta and distally to the celiac artery, when performed	Yes	Yes	33880 or 33881	1/1/2024	1/1/2024	Active	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33881	Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft not involving coverage of the left subclavian artery origin and all endograft extension(s) placed from the level of the left subclavian carotid artery to the celiac artery	Yes	Yes	33880 OR 33881	1/1/2024	1/1/2024	Active	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33883	Delayed placement of proximal extension prosthesis(es) not involving coverage of the left subclavian artery origin, after endovascular repair of the thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed	Yes	Yes	Can be billed in addition to 33880, 33881, 33884, 33886	1/1/2024	1/1/2024	Active	Active
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Thoracic Endovascular Aneurysm Repair	33886	Delayed placement of distal extension prosthesis(es) from the level of the left subclavian artery to the celiac artery, after endovascular repair of descending thoracic aorta, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation	Yes	Yes	Can be billed in addition to 33881, 33883, 33884	1/1/2024	1/1/2024	Active	Active

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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	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	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	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	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	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	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	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	Active

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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	Yes	36465 OR 36466	1/1/2024	1/1/2024	Active	Active
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	Yes	36465 OR 36466	1/1/2024	1/1/2024	Active	Active
Sclerotherapy of Veins											
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	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	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	Active
Open Treatment of Perforator Veins											
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 leg	Yes	Yes	37700 OR 37760 OR 37761	1/1/2024	1/1/2024	Active	Active
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	Yes	37700 OR 37760 OR 37761	1/1/2024	1/1/2024	Active	Active
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	Yes	37700 OR 37718 OR 37722 OR 37735 OR 37780	1/1/2024	1/1/2024	Active	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	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	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 fascia	Yes	Yes	37700 OR 37718 OR 37722 OR 37735 OR 37780	1/1/2024	1/1/2024	Active	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	Active
Phlebectomy											
Vascular Venous Interventions	Venous Interventions	Phlebectomy	37765	Stab phlebectomy of varicose veins, 1 extremity; 10-20 stab incisions	Yes	Yes	37765 OR 37766 OR 37799 OR 33785	1/1/2024	1/1/2024	Active	Active
Vascular Venous Interventions	Venous Interventions	Phlebectomy	37766	Stab phlebectomy of varicose veins, 1 extremity; more than 20 incisions	Yes	Yes	37765 OR 37766 OR 37799 OR 33785	1/1/2024	1/1/2024	Active	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	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	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	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	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	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	Active
Arterial - General											
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	37236 OR 37246, 37237 and 37247 are add-on codes which must be billed with a primary code.	1/1/2024	1/1/2024	Active	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 procedure)	Yes	Yes	37236, 37246, 37247	1/1/2024	1/1/2024	Active	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	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 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	Yes	37236, 37237, 37246	1/1/2024	1/1/2024	Active	Active
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	Yes	37252 +/- 37253	1/1/2024	1/1/2024	Active	Active
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	Yes	37252 +/- 37253	1/1/2024	1/1/2024	Active	Active

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Iliac aneurysm repair											
Vascular Arterial Interventions	Aortic Dissection/Aneurysm Repair	Iliac 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	Yes	34718	1/1/2024	1/1/2024	Active	Active
Investigational/Experimental											
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	Yes	C9765, C9766, C9767	6/1/2024	6/1/2024	Active	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	Active
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	Yes	C9764, C9765, C9767	6/1/2024	6/1/2024	Active	Active
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	Yes	C9764, C9765, C9766	6/1/2024	6/1/2024	Active	Active
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	Yes	C9773, C9774	6/1/2024	6/1/2024	Active	Active
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	Yes	C9772, C9774	6/1/2024	6/1/2024	Active	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	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	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	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	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	Active

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