

2022 CPT® Code Updates (HIM Focused)



Jennifer Bishop

RHIT, CCS, CCS-P, CHRI

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Overview of 2022 Changes

CPT® Section	Additions	Deletions	Revisions
Evaluation & Management	5	0	10
Anesthesia	6	2	0
Surgery	30	13	25
Radiology	4	3	1
Pathology & Laboratory	25	2	4
PLA	21	1	1
Medicine	16	11	4
Category II	0	0	0
Category III	43	26	6
Totals	150	58	51

- Totals do not include codes added, deleted, or revised in CY 2020/2021 but appearing for the first time in the CY 2022 book
- Revised totals do not include codes with changes to short or medium descriptions only

Changes to Surgery Section



Overall Changes to Surgery Section

CPT® Section	Additions	Deletions	Revisions
General/Integumentary (10021-19499)	0	0	1
Musculoskeletal (20005-29999)	0	1	8
Respiratory (30000-32999)	0	0	0
Cardiovascular (33010-37799)	8	2	2
Hemic & Lymphatic (38100-38999)	0	0	0
Mediastinum & Diaphragm (39000-39599)	0	0	0
Digestive (40490-49999)	2	2	0
Urinary (50010-53899)	4	0	0
Male Genital (54000-55899)	0	0	4
Female Genital (56405-58999)	0	0	0
Maternity Care & Delivery (59000-59899)	0	1	0
Endocrine (60000-60699)	0	0	0

Overall Changes to Surgery Section

CPT® Section	Additions	Deletions	Revisions
Nervous (61000-64999)	9	5	6
Eye & Ocular Adnexa (65091-68899)	3	0	2
Auditory (69000-69979)	4	2	2
Operating Microscope (69990)	0	0	0

Revised Code - Integumentary Section

CPT/HCPCS Code	2022 Long Description	2021 Long Description
11981	Insertion, drug-delivery implant <u>(ie, bioresorbable, biodegradable, non-biodegradable)</u>	Insertion, non-biodegradable drug delivery implant

Deleted Code - Musculoskeletal Section

Deleted Code	Suggested Replacement Codes
21310 – Closed treatment of nasal bone fracture without manipulation	Use appropriate E/M code to report closed treatment of nasal bone fracture without manipulation

Revised Codes - Musculoskeletal Section

CPT/HCPCS Code	2022 Long Description	2021 Long Description
21315	Closed treatment of nasal bone fracture with manipulation ; without stabilization	Closed treatment of nasal bone fracture; without stabilization
21320	Closed treatment of nasal bone fracture with manipulation ; with stabilization	Closed treatment of nasal bone fracture; with stabilization
22600	Arthrodesis, posterior or posterolateral technique, single interspace ; cervical below C2 segment	Arthrodesis, posterior or posterolateral technique, single level ; cervical below C2 segment
22610	Arthrodesis, posterior or posterolateral technique, single interspace ; thoracic (with lateral transverse technique, when performed)	Arthrodesis, posterior or posterolateral technique, single level ; thoracic (with lateral transverse technique, when performed)
22612	Arthrodesis, posterior or posterolateral technique, single interspace ; lumbar (with lateral transverse technique, when performed)	Arthrodesis, posterior or posterolateral technique, single level ; lumbar (with lateral transverse technique, when performed)
22614	Arthrodesis, posterior or posterolateral technique, single interspace ; each additional vertebral segment (List separately in addition to code for primary procedure)	Arthrodesis, posterior or posterolateral technique, single level ; each additional vertebral segment (List separately in addition to code for primary procedure)
22633	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace; lumbar	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment ; lumbar
22634	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace; each additional interspace (List separately in addition to code for primary procedure)	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment ; each additional interspace and segment (List separately in addition to code for primary procedure)

Revised Guidelines - Musculoskeletal

- Section guidelines have been revised to clarify fracture and dislocation treatment coding
 - Casting, splinting, or strapping for patient comfort is NOT closed treatment
 - All services in the MSK section include application and removal of first cast, splint, or traction device
 - Replacement of cast, splint, strap, or traction device may be reported separately
 - There is no correlation between the type of fracture and the type of treatment required
 - Treatment of fracture not defined in the guidelines should be reported using E/M code

Definitions - Musculoskeletal

- Traction – Application of force to spine or limb
 - Skeletal traction includes wire, pin, screw, or clamp that attaches to bone
 - Skin traction applies directly to skin via strap or other device
- Closed treatment – Treatment site is not surgically opened
- Percutaneous skeletal fixation – Treatment is not open or closed; fixation is placed across the fracture, usually with imaging guidance
- Open treatment – Site is opened surgically to expose the fracture/dislocation for treatment OR is treated through the traumatic wound OR is treated with nail or fixation device through remote surgical site (femoral fracture is common site)
- External fixation – Use of pins/wires to penetrate the bone
 - Uniplanar – Pins in basically the same plane
 - Multiplanar – Uses wires and threaded pins held by interconnected rings in multiple planes

Added Codes - Cardiovascular Section

Three New Codes Added to Capture Left Atrial Appendage Exclusion Procedures

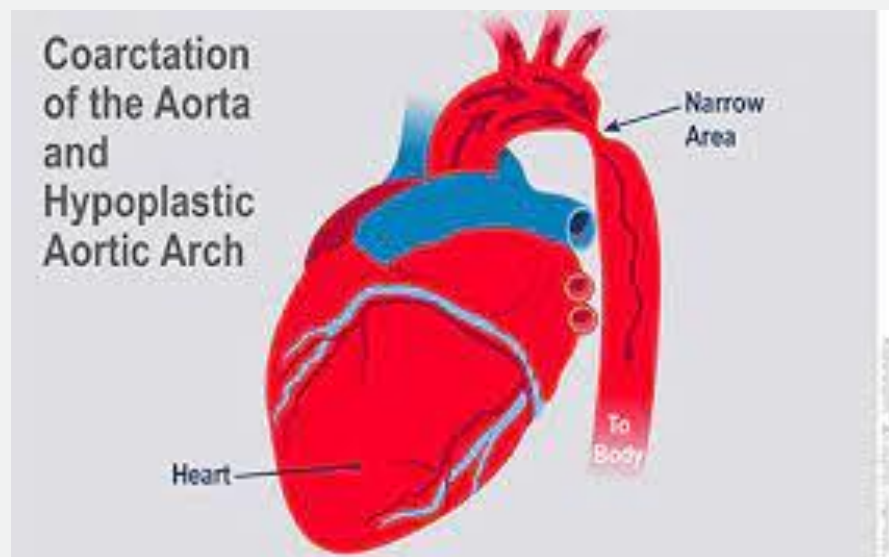
- 33267 - Exclusion of left atrial appendage, open, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)
- 33268 – Exclusion of left atrial appendage, open, performed at the time of other sternotomy or thoracotomy procedure(s), any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip) (List separately in addition to code for primary procedure)
- 33269 - Exclusion of left atrial appendage, thoracoscopic, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)
 - Inherent to maze procedures and mitral valve repair/replacement procedures

Added Codes - Cardiovascular Section

Three New Codes Added to Report Repair of Coarctation of the Aorta

- 33894 - Endovascular stent repair of coarctation of the ascending, transverse, or descending thoracic or abdominal aorta, involving stent placement; across major side branches
- 33895 – Endovascular stent repair of coarctation of the ascending, transverse, or descending thoracic or abdominal aorta, involving stent placement; not crossing major side branches
- 33897 - Percutaneous transluminal angioplasty of native or recurrent coarctation of the aorta

Guidelines – Repair of Aortic Coarctation



- Codes 33894, 33895, and 33897 describe transcatheter interventions to revascularize or repair coarctation of the aorta
- 33897 describes angioplasty without stent placement
- 33894 and 33895 include angioplasty, when performed in the stent treatment zone

Guidelines – Repair of Aortic Coarctation

- 33894, 33895, and 33897 include fluoroscopic guidance, diagnostic LHC, catheter insertions, and angiography
- 33894 and 33895 include temporary pacemaker insertion (33210), stent extension(s), and angioplasty of lesion being treated
- Major side branches of the thoracic aorta: Brachiocephalic, carotid, and subclavian
- Major side branches of the abdominal aorta: Celiac, superior mesenteric, inferior mesenteric, and renal

Added Codes - Cardiovascular Section

Two New Add-On Codes

- 33370 - Transcatheter placement and subsequent removal of cerebral embolic protection device(s), including arterial access, catheterization, imaging, and radiological supervision and interpretation, percutaneous (List separately in addition to code for primary procedure)
 - Use with codes 33361-33366 (Transcatheter TAVR/TAVI procedures)
- 33509 – Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, endoscopic
 - Code added to reflect endoscopic procedure – See 35600 for open procedure
 - Use modifier -50 for bilateral procedure

Deleted Code - Cardiovascular Section

Deleted Code	Suggested Replacement Codes
33470 – Valvotomy, pulmonary valve, closed heart; transventricular	No replacement; procedure deleted due to low utilization
33722 – Closure of aortico-left ventricular tunnel	No replacement; procedure deleted due to low utilization

Revised Codes - Cardiovascular Section

CPT/HCPCS Code	2022 Long Description	2021 Long Description
33471	Valvotomy, pulmonary valve, closed heart, <u>via</u> pulmonary artery	Valvotomy, pulmonary valve, closed heart, <u>via</u> pulmonary artery
35600	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, <u>open</u>	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure (List separately in addition to code for primary procedure)

- Code 33471 is no longer a child code due to deletion of 33470
- Code 35600 now describes harvest of upper extremity artery via an open approach

Added Codes – Digestive Section

- 42975 – Drug-induced sleep endoscopy, with dynamic evaluation of velum, pharynx, tongue base, and larynx for evaluation of sleep-disordered breathing, flexible, diagnostic
 - Currently reported using laryngoscopy code (31575), bronchoscopy code (31622), or otolaryngology code (92502)

- 43497 - Lower esophageal myotomy, transoral (ie, peroral endoscopic myotomy [POEM])
 - Used to correct esophageal achalasia and spastic esophageal disorders not responsive to other therapies
 - Currently reported using unlisted code 43499

Deleted Codes - Digestive Section

Deleted Code	Suggested Replacement Codes
43850 – Revision of gastroduodenal anastomosis (gastroduodenostomy) with reconstruction; without vagotomy	No replacement – Code deleted due to low utilization
43855 - Revision of gastroduodenal anastomosis (gastroduodenostomy) with reconstruction; with vagotomy	No replacement – Code deleted due to low utilization

Added Codes – Urinary Section

Four New Codes Are Replacing Expiring Category III Codes (0548T-0551T) for Transperineal Balloon Continence Device Procedures

- 53451 – Periurethral transperineal adjustable balloon continence device; bilateral insertion, including cystourethroscopy and imaging guidance
- 53452 - Periurethral transperineal adjustable balloon continence device; unilateral insertion, including cystourethroscopy and imaging guidance
- 53453 - Periurethral transperineal adjustable balloon continence device; removal, each balloon
- 53454 - Periurethral transperineal adjustable balloon continence device; percutaneous adjustment of balloon(s) fluid volume

Revised Codes – Male Genital Section

CPT/HCPCS Code	2022 Long Description	2021 Long Description
54340	Repair of hypospadias complication(s) (ie, fistula, stricture, diverticula); by closure, incision, or excision, simple	Repair of hypospadias complications (ie, fistula, stricture, diverticula); by closure, incision, or excision, simple
54344	Repair of hypospadias complication(s) (ie, fistula, stricture, diverticula); requiring mobilization of skin flaps and urethroplasty with flap or patch graft	Repair of hypospadias complications (ie, fistula, stricture, diverticula); requiring mobilization of skin flaps and urethroplasty with flap or patch graft
54348	Repair of hypospadias complication(s) (ie, fistula, stricture, diverticula); requiring extensive dissection and urethroplasty with flap, patch or tubed graft (<u>including</u> urinary diversion, <u>when performed</u>)	Repair of hypospadias complications (ie, fistula, stricture, diverticula); requiring extensive dissection and urethroplasty with flap, patch or tubed graft (includes urinary diversion)
54352	<u>Revision of prior hypospadias repair</u> requiring extensive dissection and excision of previously constructed structures including re-release of chordee and reconstruction of urethra and penis by use of local skin as grafts and island flaps and skin brought in as flaps or grafts	Repair of hypospadias-eripple requiring extensive dissection and excision of previously constructed structures including re-release of chordee and reconstruction of urethra and penis by use of local skin as grafts and island flaps and skin brought in as flaps or grafts

Deleted Code – Maternity Care & Delivery Section

Deleted Code	Suggested Replacement Codes
59135 – Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy requiring total hysterectomy	No replacement code

Added Codes – Nervous Section

Two New Codes Created to Report Laser Interstitial Thermal Therapy of Intracranial Lesions



- 61736 – Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; single trajectory for 1 simple lesion
- 61737 - Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; multiple trajectories for multiple or complex lesion(s)

Added Codes – Nervous Section

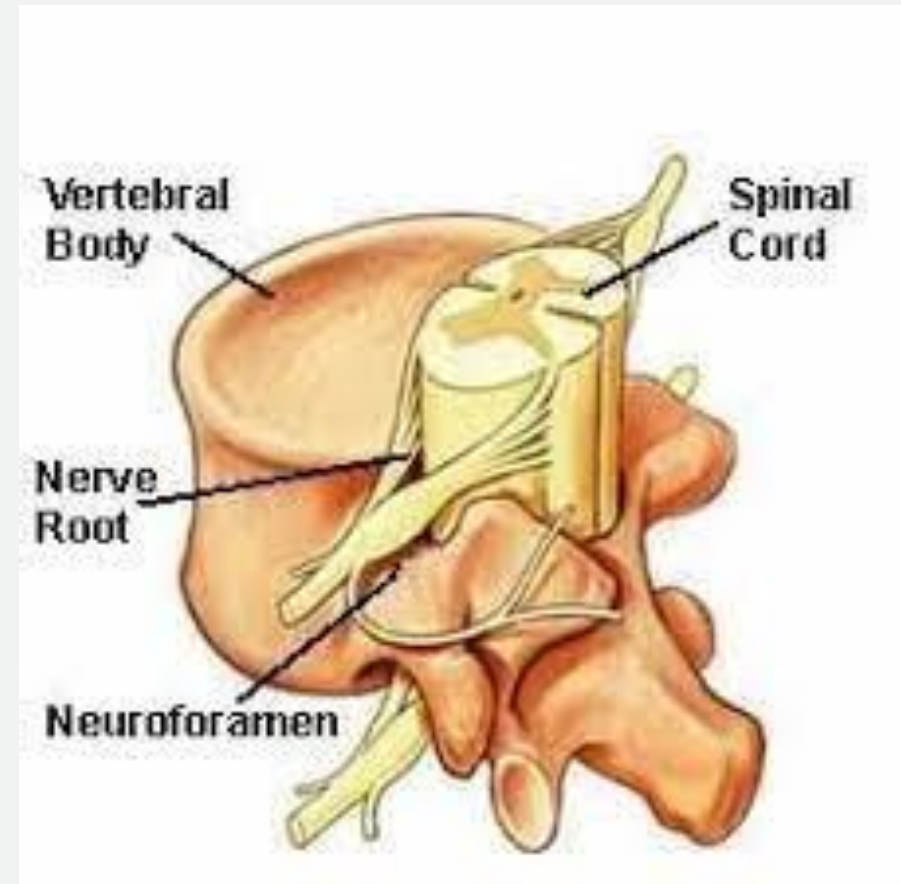
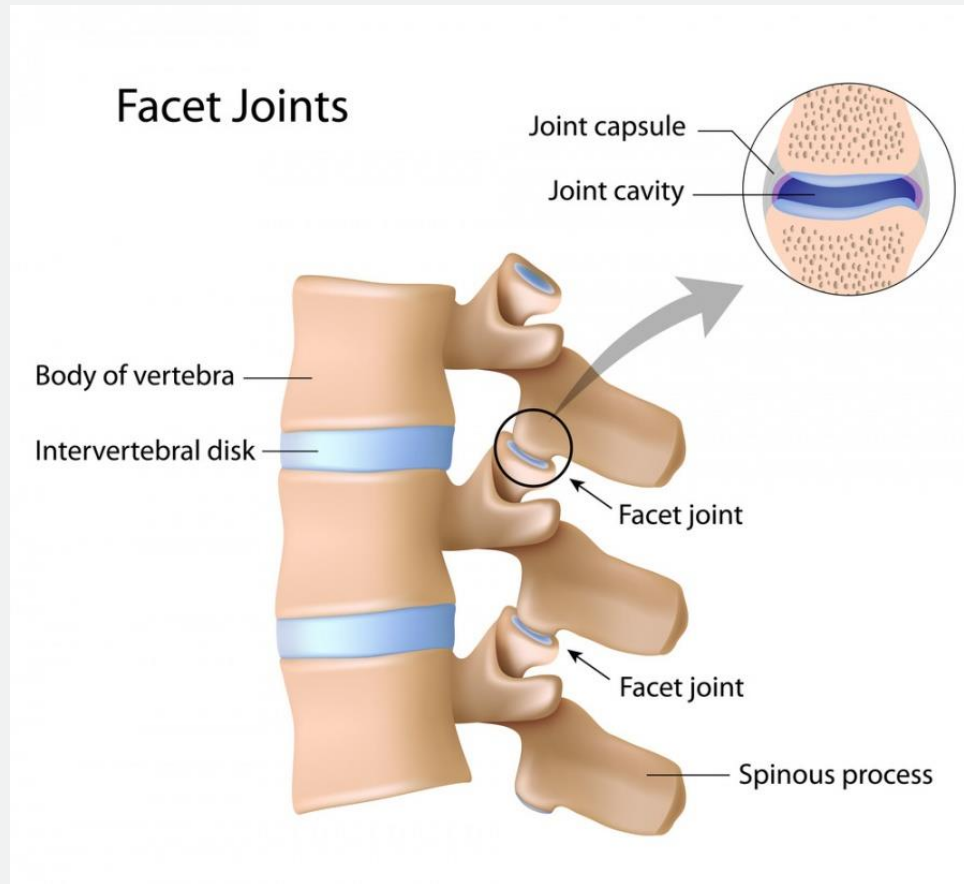
Two New Add-On Codes Created to Report Decompression During Spinal Arthrodesis

- 63052 – Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; single vertebral segment (List separately in addition to code for primary procedure)
- 63053 - Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; each additional segment (List separately in addition to code for primary procedure)

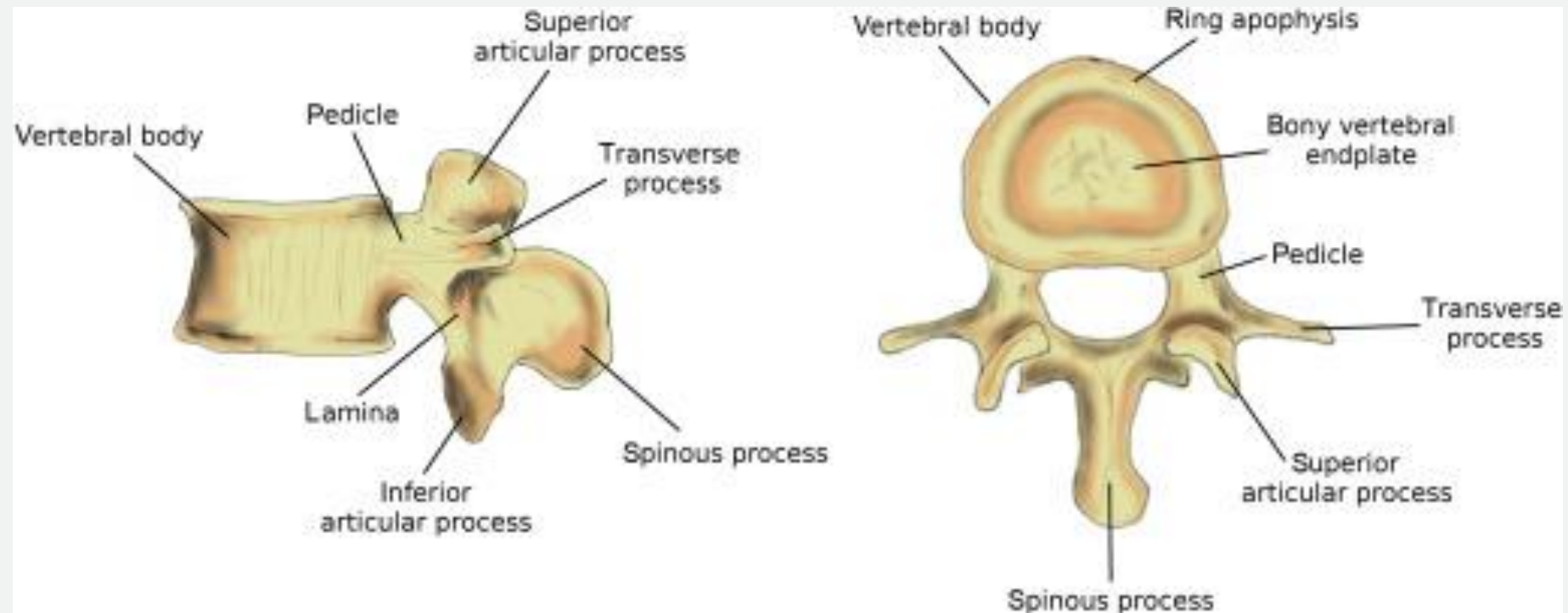
Definitions - Spinal

- Corpectomy – Removal of a vertebral body during spinal surgery
- Facetectomy – Excision of the facet joint between two vertebral bodies
- Foraminotomy – Excision of bone to widen the intervertebral foramen
- Hemilaminectomy – Removal of portion of vertebral lamina
- Laminectomy – Removal of vertebral lamina (usually means removal of posterior arch)
- Laminotomy – Removal of portion of vertebral lamina to enlarge intervertebral foramen to relieve compressed spinal nerve root
- Decompression on the same vertebral segment/interspace as posterior lumbar interbody fusion that includes laminectomy, facetectomy, and/or foraminotomy may be separately reported using 63052 and 63053
- Decompression done to prepare the interspace for fusion is NOT separately coded

Definitions – Spinal



Definitions - Spinal



Added Codes – Nervous Section

Three New Codes Created to Report Hypoglossal Nerve Neurostimulator Procedures

- 64582 – Open implantation of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array
- 64583 - Revision or replacement of hypoglossal nerve neurostimulator array and distal respiratory sensor electrode or electrode array, including connection to existing pulse generator
 - When one component is revised or replaced, assign modifier -52
- 64584 - Removal of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array
 - When one of the two components is removed, assign modifier -52

Added Codes – Nervous Section

Two New Codes Created to Report Thermal Destruction of the Intraosseous Basivertebral Nerve in the Lumbosacral Region



- 64628 – Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral
- 64629 - Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral (List separately in addition to code for primary procedure)

Deleted Codes - Nervous Section

Deleted Code	Suggested Replacement Codes
63194 – Laminectomy with cordotomy, with section of 1 spinothalamic tract, 1 stage; cervical	No replacement codes for these procedures; deleted due to low utilization
63195 – Laminectomy with cordotomy, with section of 1 spinothalamic tract, 1 stage; thoracic	
63196 – Laminectomy with cordotomy, with section of both spinothalamic tracts, 1 stage; cervical	
63198 - Laminectomy with cordotomy, with section of both spinothalamic tracts, 2 stages with 14 days; cervical	
63199 - Laminectomy with cordotomy, with section of both spinothalamic tracts, 2 stages with 14 days; thoracic	

Revised Codes - Nervous Section

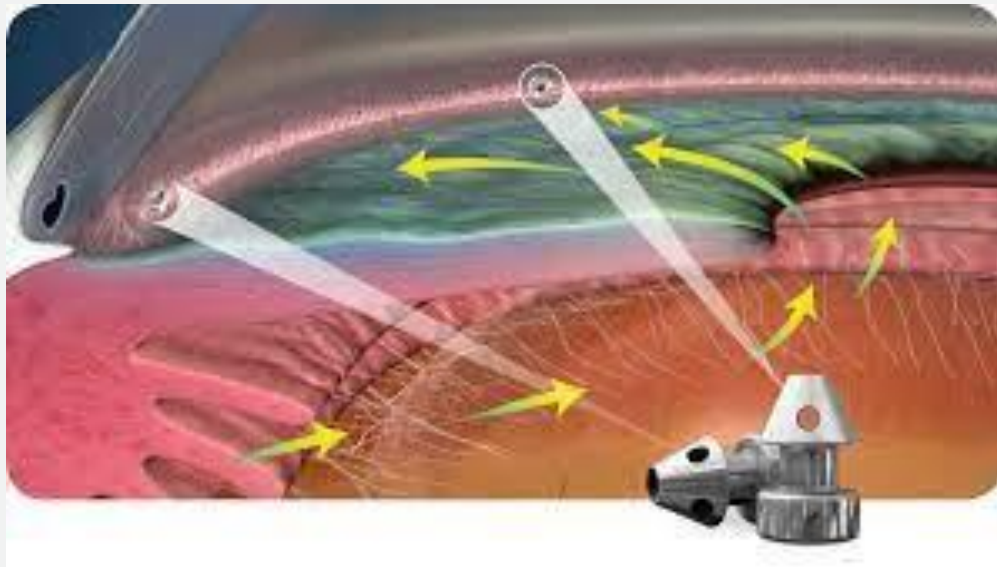
CPT/HCPCS Code	2022 Long Description	2021 Long Description
63048	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; each additional <u>vertebral</u> segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure)	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; each additional segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure)
63197	Laminectomy with cordotomy, with section of both spinothalamic tracts, 1 stage, <u>thoracic</u>	Laminectomy with cordotomy, with section of both spinothalamic tracts, 1 stage; thoracic
64568	<u>Open</u> implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator	Incision for implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator
64575	<u>Open</u> implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)	Incision for implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)
64580	<u>Open</u> implantation of neurostimulator electrode array; neuromuscular	Incision for implantation of neurostimulator electrode array; neuromuscular
64581	<u>Open</u> implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)	Incision for implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)

Added Codes – Eye and Ocular Adnexa Section

Two New Codes Added to Capture Cataract Removal When Procedure Includes Insertion of an Aqueous Drainage Device

- 66989 – Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification), complex, requiring devices or techniques not generally used in routine cataract surgery (eg, iris expansion device, suture support for intraocular lens, or primary posterior capsulorrhexis) or performed on patients in the amblyogenic developmental stage; with insertion of intraocular (eg, trabecular meshwork, supraciliary, suprachoroidal) anterior segment aqueous drainage device, without extraocular reservoir, internal approach, one or more
- 66991 - Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification); with insertion of intraocular (eg, trabecular meshwork, supraciliary, suprachoroidal) anterior segment aqueous drainage device, without extraocular reservoir, internal approach, one or more

Added Codes – Eye and Ocular Adnexa Section



•Glaukos® iStent inject®

- Targets the trabecular meshwork to allow for multi-directional flow of aqueous humor through Schlemm's Canal
- Minimally-invasive glaucoma surgery
- When done with cataract surgery, see 66989 and 66991; when done without cataract surgery, see 0671T

Added Codes – Eye and Ocular Adnexa Section

New Code Created to Report Lacrimal Canaliculus Drug-Eluting Stent

- 68841 – Insertion of drug-eluting implant, including punctal dilation when performed, into lacrimal canaliculus, each
 - Category III Code 0356T is currently used to report this procedure



Revised Codes – Eye and Ocular Adnexa Section

CPT/HCPCS Code	2022 Long Description	2021 Long Description
67141	Prophylaxis of retinal detachment (eg, retinal break, lattice degeneration) without drainage; cryotherapy, diathermy	Prophylaxis of retinal detachment (eg, retinal break, lattice degeneration) without drainage, 1 or more sessions ; cryotherapy, diathermy
67145	Prophylaxis of retinal detachment (eg, retinal break, lattice degeneration) without drainage; photocoagulation	Prophylaxis of retinal detachment (eg, retinal break, lattice degeneration) without drainage, 1 or more sessions ; photocoagulation (laser or xenon arc)

Added Codes - Auditory Section

Four New Codes Added to Capture Osseointegrated Implant Procedures

- 69716 – Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor
- 69719 - Revision or replacement (including removal of existing device), osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor
- 69726 - Removal, osseointegrated implant, skull; with percutaneous attachment to external speech processor
- 69727 - Removal, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor

Added Codes - Auditory Section



Baha® Attract



Baha® Connect

Deleted Code - Auditory Section

Deleted Code	Suggested Replacement Codes
69715 – Implantation, osseointegrated implant, temporal bone, with percutaneous attachment to external speech processor/cochlear stimulator; with mastoidectomy	Procedure will require two codes; 69714 to capture implantation plus appropriate code from 69501-69676 range to capture mastoidectomy.
69718 – Replacement (including removal of existing device), osseointegrated implant, temporal bone, with percutaneous attachment to external speech processor/cochlear stimulator; with mastoidectomy	Procedure will require two codes; 69717 to capture implantation plus appropriate code from 69501-69676 range to capture mastoidectomy.

Revised Codes – Auditory Section

CPT/HCPCS Code	2022 Long Description	2021 Long Description
69714	Implantation, osseointegrated implant, <u>skull</u> ; with percutaneous attachment to external speech processor	Implantation, osseointegrated implant, temporal bone , with percutaneous attachment to external speech processor/ cochlear stimulator; without mastoidectomy
69717	<u>Revision or</u> replacement (including removal of existing device), osseointegrated implant, <u>skull</u> ; with percutaneous attachment to external speech processor	Replacement (including removal of existing device), osseointegrated implant, temporal bone , with percutaneous attachment to external speech processor/ cochlear stimulator; without mastoidectomy

Changes to Medicine Section

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**"I'm sorry, the computer made an error.
You're not influential, you have influenza."**

Added Codes – Cardiovascular

Right Heart Catheterization for Congenital Cardiac Anomalies Will Be Based on Heart Anatomy

- 93593 - Right heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone; normal native connections
- 93594 - Right heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone; abnormal native connections
- 93595 - Left heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone, normal or abnormal native connections
- 93596 - Right and left heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone(s); normal native connections
- 93597 - Right and left heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone(s); abnormal native connections

Native Connections

•Normal Native Connections

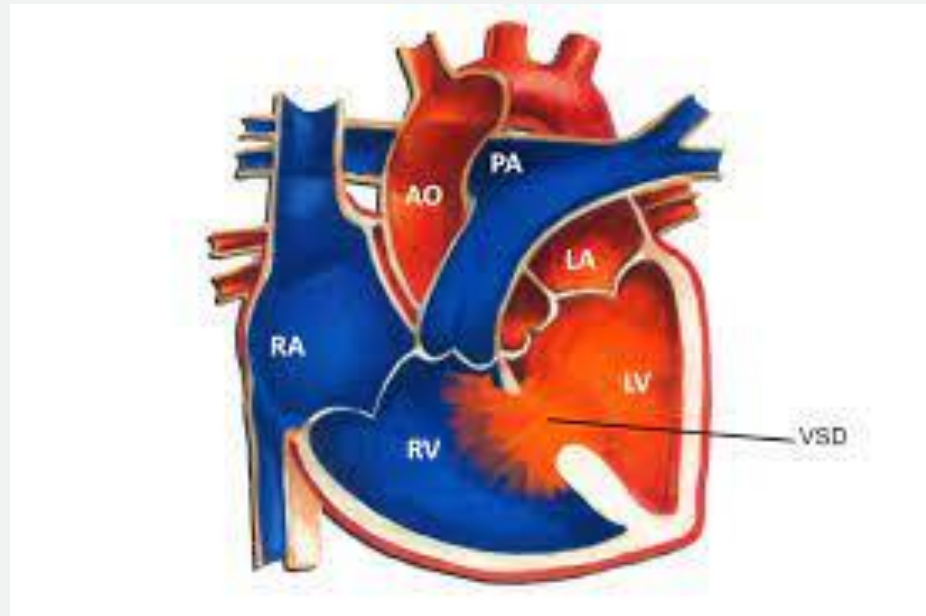
- Blood flow follows the expected pathway through the heart chambers and great vessels
 - Isolated atrial septal defect
 - Ventricular septal defect
 - Patent ductus arteriosus
- Use 93593, 93595, and 93596

•Abnormal Native Connections

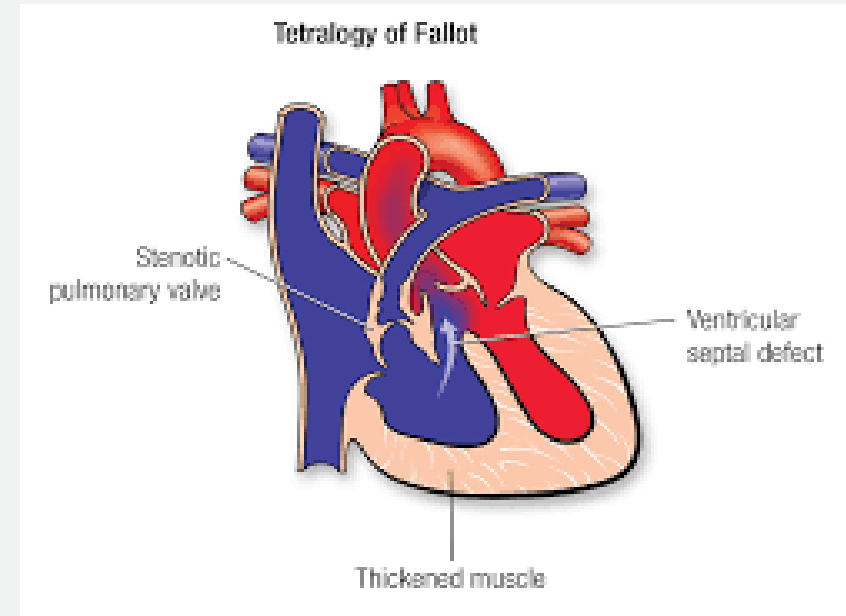
- Alternative connections for the blood pathway through the heart chambers and great vessels
 - Single ventricle anatomy
 - Transposition of great arteries
 - Tetralogy of Fallot
 - Valvular atresia
 - Unbalanced AV canal defect
- Use 93594, 93595, and 93597

Native Connections

Normal Native Connections



Abnormal Native Connections



Added Codes – Cardiovascular

Two New Add-on Codes Will Capture Services Provided During Heart Catheterization for Congenital Heart Defects

- 93319 - 3D echocardiographic imaging and postprocessing during transesophageal echocardiography, or during transthoracic echocardiography for congenital cardiac anomalies, for the assessment of cardiac structure(s) (eg, cardiac chambers and valves, left atrial appendage, interatrial septum, interventricular septum) and function, when performed (List separately in addition to code for echocardiographic imaging)
 - Can be added to TEE for any indication (93312, 93314, 93315, 93317)
 - Can be added to TTE for congenital anomalies only (93303, 93304)
- 93598 - Cardiac output measurement(s), thermodilution or other indicator dilution method, performed during cardiac catheterization for the evaluation of congenital heart defects (List separately in addition to code for primary procedure)
 - 93563-93568 are separately reported for cardiac catheterization for congenital heart defects due to variability in cardiovascular anatomy encountered

Deleted Codes - Cardiovascular

Deleted Code	Suggested Replacement Codes
93530 – Right heart catheterization, for congenital cardiac anomalies	93593 or 93594
93531 – Combined right heart catheterization and retrograde left heart catheterization, for congenital cardiac anomalies	93596 or 93597
93532 – Combined right heart catheterization and transseptal left heart catheterization through existing septal opening with or without retrograde left heart catheterization, for congenital cardiac anomalies	93596 or 93597
93533 – Combined right heart catheterization and transseptal left heart catheterization through existing septal opening, with or without retrograde left heart catheterization, for congenital cardiac anomalies	93596 or 93597

Deleted Codes - Cardiovascular

Deleted Code	Suggested Replacement Codes
93561 – Indicator dilution studies such as dye or thermodilution, including arterial and/or venous catheterization; with cardiac output measurement (separate procedure)	93598
93562 – Indicator dilution studies such as dye or thermodilution, including arterial and/or venous catheterization; subsequent measurement of cardiac output	93598

Revised Codes – Cardiovascular

CPT/HCPCS Code	2022 Long Description	2021 Long Description
93653	Comprehensive electrophysiologic evaluation <u>with</u> insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording <u>and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping</u> , right ventricular pacing and recording, <u>left atrial pacing and recording from coronary sinus or left atrium</u> , and His bundle recording, <u>when performed</u> ; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry	Comprehensive electrophysiologic evaluation <u>including</u> insertion and repositioning of multiple electrode catheters <u>with</u> induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when-necessary) , and His bundle recording (when-necessary)-with-intracardiac-catheter-ablation-of-arrhythmogenic-focus ; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry
93654	Comprehensive electrophysiologic evaluation <u>with</u> insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording <u>and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping</u> , right ventricular pacing and recording, <u>left atrial pacing and recording from coronary sinus or left atrium</u> , and His bundle recording, <u>when performed</u> ; with treatment of ventricular tachycardia or focus of ventricular ectopy including intracardiac electrophysiologic 3D mapping, when performed, and left ventricular pacing and recording, when performed	Comprehensive electrophysiologic evaluation <u>including</u> insertion and repositioning of multiple electrode catheters <u>with</u> induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when-necessary) , and His bundle recording (when-necessary)-with-intracardiac-catheter-ablation-of-arrhythmogenic-focus ; with treatment of ventricular tachycardia or focus of ventricular ectopy including <u>intracardiac electrophysiologic 3D mapping, when-performed, and</u> left ventricular pacing and recording, when performed
93656	Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with <u>intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including intracardiac electrophysiologic 3-dimensional mapping, intracardiac echocardiography including imaging supervision and interpretation</u> , induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, right ventricular pacing/recording, and His bundle recording when <u>performed</u>	Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia including left or right atrial pacing/recording <u>when-necessary</u> , right ventricular pacing/recording <u>when-necessary</u> , and His bundle recording when <u>necessary-with-intracardiac-catheter-ablation-of-atrial-fibrillation-by-pulmonary-vein-isolation</u>

Changes to Cardiac Ablation

Clarification of Services That Are Bundled Into These Procedures

- **93653**/93654 include 3D mapping (93613) and left atrial pacing (93621)
- Transseptal catheterization (93462), ICE (93662) and EP evaluation of pacemaker or ICD (**93642**) CAN be reported with 93653/93654
- 93656 includes 3D mapping (**93613**), ICE (**93662**), and transseptal catheterization (93462)
- See new table – “Elements of Cardiac Ablation Codes”

Changes to Category III Codes



Added Codes

New & Emerging Technology

Code	Long Description
0671T	Insertion of anterior segment aqueous drainage device into the trabecular meshwork, without external reservoir, and without concomitant cataract removal, one or more
0672T	Endovaginal cryogen-cooled, monopolar radiofrequency remodeling of the tissues surrounding the female bladder neck and proximal urethra for urinary incontinence
0673T	Ablation, benign thyroid nodule(s), percutaneous, laser, including imaging guidance

Added Codes

New & Emerging Technology

Code	Long Description
0674T	Laparoscopic insertion of new or replacement of permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including an implantable pulse generator and diaphragmatic lead(s)
0675T	Laparoscopic insertion of new or replacement of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; first lead
0676T	Laparoscopic insertion of new or replacement of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; each additional lead (List separately in addition to code for primary procedure)
0677T	Laparoscopic repositioning of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; first repositioned lead

Added Codes

New & Emerging Technology

Code	Long Description
0678T	Laparoscopic repositioning of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; each additional repositioned lead (List separately in addition to code for primary procedure)
0679T	Laparoscopic removal of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function
0680T	Insertion or replacement of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, with connection to existing lead(s)
0681T	Relocation of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, with connection to existing dual leads
0682T	Removal of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function

Added Codes

New & Emerging Technology

Code	Long Description
0683T	Programming device evaluation (in-person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function
0684T	Peri-procedural device evaluation (in-person) and programming of device system parameters before or after a surgery, procedure, or test with analysis, review, and report by a physician or other qualified health care professional, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function
0685T	Interrogation device evaluation (in-person) with analysis, review and report by a physician or other qualified health care professional, including connection, recording and disconnection per patient encounter, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function

Added Codes

New & Emerging Technology

Code	Long Description
0686T	Histotripsy (ie, non-thermal ablation via acoustic energy delivery) of malignant hepatocellular tissue, including image guidance
0699T	Injection, posterior chamber of eye, medication
0707T	Injection(s), bone-substitute material (eg, calcium phosphate) into subchondral bone defect (ie, bone marrow lesion, bone bruise, stress injury, microtrabecular fracture), including imaging guidance and arthroscopic assistance for joint visualization

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0191T – Insertion of anterior segment aqueous drainage device, without extraocular reservoir, internal approach, into the trabecular meshwork; initial insertion	No direct replacement; now included as a component of 66989 and 66991
0290T – Corneal incisions in the recipient cornea created using a laser, in preparation for penetrating or lamellar keratoplasty (List separately in addition to code for primary procedure)	Procedure is included in more comprehensive procedures
0355T – Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), colon, with interpretation and report	91113
0356T – Insertion of drug-eluting implant (including punctal dilation and implant removal when performed) into lacrimal canaliculus, each	68841

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0376T – Insertion of anterior segment aqueous drainage device, without extraocular reservoir, internal approach, into the trabecular meshwork; each additional device insertion (List separately in addition to code for primary procedure)	No direct replacement; now included as a component of 66989 and 66991
0451T – Insertion or replacement of a permanently implantable aortic counterpulsation ventricular assist system, endovascular approach, and programming of sensing and therapeutic parameters; complete system (counterpulsation device, vascular graft, implantable vascular hemostatic seal, mechano-electrical skin interface and subcutaneous electrodes)	There is no direct replacement for this code

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0452T – Insertion or replacement of a permanently implantable aortic counterpulsation ventricular assist system, endovascular approach, and programming of sensing and therapeutic parameters; aortic counterpulsation device and vascular hemostatic seal	There is no direct replacement for this code
0453T – Insertion or replacement of a permanently implantable aortic counterpulsation ventricular assist system, endovascular approach, and programming of sensing and therapeutic parameters; mechano-electrical skin interface	There is no direct replacement for this code
0454T – Insertion or replacement of a permanently implantable aortic counterpulsation ventricular assist system, endovascular approach, and programming of sensing and therapeutic parameters; subcutaneous electrode	There is no direct replacement for this code

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0455T – Removal of permanently implantable aortic counterpulsation ventricular assist system; complete system (aortic counterpulsation device, vascular hemostatic seal, mechano-electrical skin interface and electrodes)	There is no direct replacement for this code
0456T – Removal of permanently implantable aortic counterpulsation ventricular assist system; aortic counterpulsation device and vascular hemostatic seal	There is no direct replacement for this code
0457T – Removal of permanently implantable aortic counterpulsation ventricular assist system; mechano-electrical skin interface	There is no direct replacement for this code
0458T - Removal of permanently implantable aortic counterpulsation ventricular assist system; subcutaneous electrode	There is no direct replacement for this code

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0459T – Relocation of skin pocket with replacement of implanted aortic counterpulsation ventricular assist device, mechano-electrical skin interface and electrodes	There is no direct replacement for this code
0460T – Repositioning of previously implanted aortic counterpulsation ventricular assist device; subcutaneous electrode	There is no direct replacement for this code
0461T – Repositioning of previously implanted aortic counterpulsation ventricular assist device; aortic counterpulsation device	There is no direct replacement for this code

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0462T – Programming device evaluation (in person) with iterative adjustment of the implantable mechano-electrical skin interface and/or external driver to test the function of the device and select optimal permanent programmed values with analysis, including review and report, implantable aortic counterpulsation ventricular assist system, per day	There is no direct replacement for this code
0463T – Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording and disconnection per patient encounter, implantable aortic counterpulsation ventricular assist system, per day	There is no direct replacement for this code

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0466T – Insertion of chest wall respiratory sensor electrode or electrode array, including connection to pulse generator (List separately in addition to code for primary procedure)	Now included as a component of a more extensive procedure – See 64582
0467T – Revision or replacement of chest wall respiratory sensor electrode or electrode array, including connection to existing pulse generator	Now included as a component of a more extensive procedure – See 64583
0468T - Removal of chest wall respiratory sensor electrode or electrode array	Now included as a component of a more extensive procedure – See 64584

Deleted Codes

New & Emerging Technology

Deleted Code	Suggested Replacement Codes
0548T – Transperineal periurethral balloon continence device; bilateral placement, including cystoscopy and fluoroscopy	53451
0549T – Transperineal periurethral balloon continence device; unilateral placement, including cystoscopy and fluoroscopy	53452
0550T - Transperineal periurethral balloon continence device; removal, each balloon	53453
0551T - Transperineal periurethral balloon continence device; adjustment of balloon(s) fluid volume	53454

Revised Codes – Category III Codes

CPT/HCPCS Code	2022 Long Description	2021 Long Description
0101T	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified,
0102T	Extracorporeal shock wave performed by a physician, requiring anesthesia other than local, <u>and</u> involving <u>the</u> lateral humeral epicondyle	Extracorporeal shock wave, high-energy , performed by a physician, requiring anesthesia other than local, involving lateral humeral epicondyle
0512T	Extracorporeal shock wave for integumentary wound healing, including topical application and dressing care; initial wound	Extracorporeal shock wave for integumentary wound healing, high-energy , including topical application and dressing care; initial wound
0513T	Extracorporeal shock wave for integumentary wound healing, including topical application and dressing care; each additional wound (List separately in addition to code	Extracorporeal shock wave for integumentary wound healing, high-energy , including topical application and dressing care; each additional wound (List separately in addition
0621T	Trabeculostomy ab interno by laser	Trabeculostomy ab interno by laser;



Questions?

A large, faint, light blue watermark of the Vitalware logo is centered in the background. The logo consists of a stylized 'V' followed by three 'W's, all enclosed within a circular border.

Thank you!