



Procedure Codes

2024
Humana
v1
Effective 1/1/2024

NOTE: Green highlight denotes additional procedure(s) for 2024.

Medicare IP Only = Y means the code can only be requested and authorized as IP

Procedures highlighted in red are non-covered per Humana Commercial Medical Coverage Policy.

DIAGNOSTIC IMAGING

CT	CODES:	Medicare IP Only
Computed tomography, head or brain; without contrast material	70450	
Computed tomography, head or brain; with contrast material(s)	70460	
Computed tomography, head or brain; without contrast material, followed by contrast material(s) and further sections	70470	
Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	70480	
Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; with contrast material(s)	70481	
Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material, followed by contrast material(s) and further sections	70482	
Computed tomography, maxillofacial area; without contrast material	70486	
Computed tomography, maxillofacial area; with contrast material(s)	70487	
Computed tomography, maxillofacial area; without contrast material, followed by contrast material(s) and further sections	70488	
Computed tomography, soft tissue neck; without contrast material	70490	
Computed tomography, soft tissue neck; with contrast material(s)	70491	
Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	70492	
Computed tomography, thorax, diagnostic; without contrast material	71250	
Computed tomography, thorax, diagnostic; with contrast material(s)	71260	
Computed tomography, thorax, diagnostic; without contrast material, followed by contrast material(s) and further sections	71270	
Computed tomography, cervical spine; without contrast material	72125	
Computed tomography, cervical spine; with contrast material	72126	
Computed tomography, cervical spine; without contrast material, followed by contrast material(s) and further sections	72127	
Computed tomography, thoracic spine; without contrast material	72128	
Computed tomography, thoracic spine; with contrast material	72129	

CT - cont	CODES:	Medicare IP Only
Computed tomography, thoracic spine; without contrast material, followed by contrast material(s) and further sections	72130	
Computed tomography, lumbar spine; without contrast material	72131	
Computed tomography, lumbar spine; with contrast material	72132	
Computed tomography, lumbar spine; without contrast material, followed by contrast material(s) and further sections	72133	
Computed tomography, pelvis; without contrast material	72192	
Computed tomography, pelvis; with contrast material(s)	72193	
Computed tomography, pelvis; without contrast material, followed by contrast material(s) and further sections	72194	
Computed tomography, upper extremity; without contrast material	73200	
Computed tomography, upper extremity; with contrast material(s)	73201	
Computed tomography, upper extremity; without contrast material, followed by contrast material(s) and further sections	73202	
Computed tomography, lower extremity; without contrast material	73700	
Computed tomography, lower extremity; with contrast material(s)	73701	
Computed tomography, lower extremity; without contrast material, followed by contrast material(s) and further sections	73702	
Computed tomography, abdomen; without contrast material	74150	
Computed tomography, abdomen; with contrast material(s)	74160	
Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	74170	
Computed tomography, abdomen and pelvis; without contrast material	74176	
Computed tomography, abdomen and pelvis; with contrast material(s)	74177	
Computed tomography, abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions	74178	
Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	74261	
Computed tomographic (CT) colonography, diagnostic, including image postprocessing; with contrast material(s) including non-contrast images, if performed	74262	
Computed tomography, limited or localized follow-up study	76380	

CTA	CODES:
Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	70496
Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	70498
Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	71275
Computed tomographic angiography, pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	72191
Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	73206
Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	73706
Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	74174
Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	74175
Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	75572
Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of left ventricular [LV] cardiac function, right ventricular [RV] structure and function and evaluation of vascular structures, if performed)	75573
Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)	75574
Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	75635

MRA	CODES:
Magnetic resonance angiography, head; without contrast material(s)	70544
Magnetic resonance angiography, head; with contrast material(s)	70545
Magnetic resonance angiography, head; without contrast material(s) followed by contrast material(s) and further sequences	70546
Magnetic resonance angiography, neck; without contrast material(s)	70547
Magnetic resonance angiography, neck; with contrast material(s)	70548
Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences	70549
Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	71555
Magnetic resonance angiography with contrast, chest (excluding myocardium)	C8909
Magnetic resonance angiography without contrast, chest (excluding myocardium)	C8910
Magnetic resonance angiography without contrast followed by with contrast, chest (excluding myocardium)	C8911
Magnetic resonance angiography, spinal canal and contents, with or without contrast material(s)	72159
Magnetic resonance angiography with contrast, spinal canal and contents	C8931
Magnetic resonance angiography without contrast, spinal canal and contents	C8932
Magnetic resonance angiography without contrast followed by with contrast, spinal canal and contents	C8933
Magnetic resonance angiography, pelvis, with or without contrast material(s)	72198
Magnetic resonance angiography with contrast, pelvis	C8918
Magnetic resonance angiography without contrast, pelvis	C8919
Magnetic resonance angiography without contrast followed by with contrast, pelvis	C8920
Magnetic resonance angiography, upper extremity, with or without contrast material(s)	73225
Magnetic resonance angiography with contrast, upper extremity	C8934
Magnetic resonance angiography without contrast, upper extremity	C8935
Magnetic resonance angiography without contrast followed by with contrast, upper extremity	C8936
Magnetic resonance angiography, lower extremity, with or without contrast material(s)	73725
Magnetic resonance angiography with contrast, lower extremity	C8912
Magnetic resonance angiography without contrast, lower extremity	C8913
Magnetic resonance angiography without contrast followed by with contrast, lower extremity	C8914
Magnetic resonance angiography, abdomen, with or without contrast material(s)	74185
Magnetic resonance angiography with contrast, abdomen	C8900
Magnetic resonance angiography without contrast, abdomen	C8901
Magnetic resonance angiography without contrast followed by with contrast, abdomen	C8902
MRI	CODES:
Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)	70336
Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	70540
Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; with contrast material(s)	70542
Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	70543

MRI - cont	CODES:
Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	70551
Magnetic resonance (eg, proton) imaging, brain (including brain stem); with contrast material	70552
Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material, followed by contrast material(s) and further sequences	70553
Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, not requiring physician or psychologist administration	70554
Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, requiring physician or psychologist administration of entire neurofunctional testing	70555
Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	71550
Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); with contrast material(s)	71551
Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences	71552
Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	72141
Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; with contrast material(s)	72142
Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	72156
Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic without contrast material	72146
Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic with contrast material(s)	72147
Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	72157
Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	72148
Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; with contrast material(s)	72149
Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	72158
Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	72195
Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	72196
Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	72197
Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	73218
Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; with contrast material(s)	73219

MRI - cont	CODES:
Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	73220
Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	73221
Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	73222
Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s), followed by contrast material(s) and further sequences	73223
Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	73718
Magnetic resonance (eg, proton) imaging, lower extremity other than joint; with contrast material(s)	73719
Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	73720
Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	73721
Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	73722
Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	73723
Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	74181
Magnetic resonance (eg, proton) imaging, abdomen; with contrast material(s)	74182
Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	74183
Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single or first gestation	74712
Cardiac magnetic resonance imaging for morphology and function without contrast material;	75557
Cardiac magnetic resonance imaging for morphology and function without contrast material; with stress imaging	75559
Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences;	75561
Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences; with stress imaging	75563
Cardiac magnetic resonance imaging for morphology and function, quantification of segmental dysfunction; with strain imaging	C9762
Cardiac magnetic resonance imaging for morphology and function, quantification of segmental dysfunction; with stress imaging	C9763
Magnetic resonance imaging with inhaled hyperpolarized xenon-129 contrast agent, chest, including preparation and administration of agent	C9791
Magnetic resonance imaging, breast, without contrast material; unilateral	77046
Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral	77048
Magnetic resonance imaging with contrast, breast; unilateral	C8903
Magnetic resonance imaging without contrast followed by with contrast, breast; unilateral	C8905
Magnetic resonance imaging, breast, without contrast material; bilateral	77047

MRI - cont	CODES:
Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	77049
Magnetic resonance imaging with contrast, breast; bilateral	C8906
Magnetic resonance imaging without contrast followed by with contrast, breast; bilateral	C8908
Magnetic resonance (eg, proton) imaging, bone marrow blood supply	77084
Magnetic resonance cholangiopancreatography (MRCP)	S8037
Magnetic resonance imaging (MRI), low-field	S8042
PET	CODES:
Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion(s) and/or ejection fraction(s), when performed, single study;	78459
Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion(s) and/or ejection fraction(s), when performed, single study; with concurrently acquired computed tomography transmission scan	78429
Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion(s) and/or ejection fraction(s), when performed; single study at rest or stress (exercise or pharmacologic)	78491
Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion(s) and/or ejection fraction(s), when performed; single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	78430
Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion(s) and/or ejection fraction(s), when performed; multiple studies at rest or and stress (exercise or pharmacologic)	78492
Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion(s) and/or ejection fraction(s), when performed; multiple studies, at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	78431
Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion(s) and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability);	78432
Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion(s) and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan	78433
Brain imaging, positron emission tomography (PET); metabolic evaluation	78608
Brain imaging, positron emission tomography (PET); perfusion evaluation	78609
Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)	78811
Positron emission tomography (PET) imaging; skull base to mid-thigh	78812
Positron emission tomography (PET) imaging; whole body	78813
Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; limited area (eg, chest, head/neck)	78814

PET - cont		CODES:
Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; skull base to mid-thigh		78815
Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		78816
PET imaging whole body; melanoma for noncovered indications		G0219
PET imaging, any site, not otherwise specified		G0235
PET imaging, full and partial-ring PET scanners only, for initial diagnosis of breast cancer and/or surgical planning for breast cancer (e.g., initial staging of axillary lymph nodes)		G0252
RADIOPHARMACEUTICALS		CODES:
*Auth is required when requesting PSMA only		
*Gallium Ga-68, dotatate, diagnostic, 0.1 mCi		A9587
*Gallium Ga-68 PSMA-11, diagnostic, (UCSF), 1 mCi		A9593
*Gallium Ga-68 PSMA-11, diagnostic, (UCLA), 1 mCi		A9594
*Piflufolastat f-18, diagnostic, 1 mCi		A9595
*Gallium ga-68 gozetotide, diagnostic, (illuccix), 1 millicurie		A9596
*Positron emission tomography radiopharmaceutical, diagnostic, for tumor identification, not otherwise classified		A9597
Flutufolastat F18, diagnostic, 1 millicurie		A9608
*Gallium locametz 1 millicuri		A9800

RADIATION THERAPY	
2D3D	CODES:
Radiation treatment delivery, superficial and/or ortho voltage, per day	77401
Radiation treatment delivery, >1 MeV; simple	77402
Radiation treatment delivery, >1 MeV; intermediate	77407
Radiation treatment delivery, >1 MeV; complex	77412
Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5MeV	G6003
Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 6-10MeV	G6004
Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 11-19MeV	G6005
Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 20MeV or greater	G6006
Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: up to 5MeV	G6007
Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 6-10MeV	G6008
Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 11-19MeV	G6009
Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 20MeV or greater	G6010
Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 5MeV	G6011
Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10MeV	G6012
Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19MeV	G6013
Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20MeV or greater	G6014

Brachytherapy	CODES:
Intraoperative radiation treatment delivery, x-ray, single treatment session	77424
Intraoperative radiation treatment delivery, electrons, single treatment session	77425
Infusion or instillation of radioelement solution (includes 3 months follow-up care)	77750
Intracavitary radiation source application; simple	77761
Intracavitary radiation source application; intermediate	77762
Intracavitary radiation source application; complex	77763
Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter up to 2.0 cm or 1 channel	77767
Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter over 2.0 cm and 2 or more channels, or multiple lesions	77768
Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 1 channel	77770
Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 2-12 channels	77771
Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; over 12 channels	77772
Interstitial radiation source application, complex, includes supervision, handling, loading of radiation source, when performed	77778
Low dose rate (LDR) prostate brachytherapy services, composite rate	G0458
High dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed	0394T
High dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed	0394T
IMRT	CODES:
Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple	77385
Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	77386
Intensity modulated treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic MLC, per treatment session	G6015
Compensator-based beam modulation treatment delivery of inverse planned treatment using 3 or more high resolution (milled or cast) compensator, convergent beam modulated fields, per treatment session	G6016
Neutron Therapy	CODES:
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)	77423
Proton Beam	CODES:
Proton treatment delivery; simple, without compensation	77520
Proton treatment delivery; simple, with compensation	77522
Proton treatment delivery; intermediate	77523
Proton treatment delivery; complex	77525

Stereotactic Radiosurgery		CODES:
Thoracic target(s) delineation for stereotactic body radiation therapy (SRS/SBRT), (photon or particle beam), entire course of treatment	32701	
Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion	61796	
Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion	61798	
Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion	63620	
Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based	77371	
Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based	77372	
Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	77373	
Image guided robotic linear accelerator-based stereotactic radiosurgery, complete course of therapy in one session, or first session of fractionated treatment	G0339	
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 five sessions per course of treatment	G0340	
BIOPSY & SURGICAL SERVICES		
Excisional Biopsy - Breast		CODES:
Excision of cyst, fibroadenoma, or other benign or malignant tumor, aberrant breast tissue, duct lesion, nipple or areolar lesion (except 19300), open, male or female, 1 or more lesions	19120	
Excision of breast lesion identified by preoperative placement of radiological marker, open; single lesion	19125	
Lumpectomy - Breast		CODES:
Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy);	19301	
Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy); with axillary lymphadenectomy	19302	
Mastectomy - Breast		CODES:
Mastectomy for gynecomastia	19300	
Mastectomy, simple, complete	19303	
Biopsy / Wedge Resection - Lung		CODES: Medicare IP Only
Thoracotomy, with diagnostic biopsy(ies) of lung infiltrate(s) (eg, wedge, incisional), unilateral	32096	Y
Thoracotomy, with diagnostic biopsy(ies) of lung nodule(s) or mass(es) (eg, wedge, incisional), unilateral	32097	Y
Thoracotomy; with therapeutic wedge resection (eg, mass, nodule), initial	32505	Y
Thoracoscopy; with diagnostic biopsy(ies) of lung infiltrate(s) (eg, wedge, incisional), unilateral	32607	
Thoracoscopy; with diagnostic biopsy(ies) of lung nodule(s) or mass(es) (eg, wedge, incisional), unilateral	32608	
Thoracoscopy, surgical; with therapeutic wedge resection (eg, mass, nodule), initial unilateral	32666	Y

Ablation (Bone, Liver, Kidney, Prostate)	CODES:	Medicare IP Only
Procedures highlighted in red are non-covered per Humana Commercial Medical Coverage Policy.		
Ablation therapy for reduction or eradication of 1 or more bone tumor(s) (e.g., metastasis) including adjacent soft tissue when involved by tumor excision, percutaneous, including imaging guidance when performed;	20982	
Ablation therapy for reduction or eradication of 1 or more bone tumor(s) (e.g., metastasis) including adjacent soft tissue when involved by tumor excision, percutaneous, including imaging guidance when performed; cryoablation	20983	
Laparoscopy, surgical, ablation of 1 or more liver tumor(s); radiofrequency	47370	
Laparoscopy, surgical, ablation of 1 or more liver tumor(s); cryosurgical	47371	
Ablation, open, of one or more liver tumor(s); radiofrequency	47380	Y
Ablation, open, of one or more liver tumor(s); cryosurgical	47381	Y
Ablation, one or more liver tumor(s), percutaneous, radiofrequency	47382	
Ablation, one or more liver tumor(s), percutaneous, cryoablation	47383	
Ablation, open, 1 or more renal mass lesion(s), cryosurgical, including intraoperative ultrasound guidance and monitoring, if performed	50250	Y
Laparoscopy, surgical; ablation of renal cysts	50541	
Laparoscopy, surgical; ablation of renal mass lesion(s), including intraoperative ultrasound guidance and monitoring, when performed	50542	
Ablation, one or more renal tumor(s), percutaneous, unilateral, radiofrequency	50592	
Ablation, renal tumor(s), unilateral, percutaneous, cryotherapy	50593	
Transurethral destruction of the prostate tissue; by microwave thermotherapy	53850	
Transurethral destruction of the prostate tissue; by radiofrequency thermotherapy	53852	
Transurethral destruction of the prostate tissue; by radiofrequency generated water vapor thermotherapy	53854	
Cryosurgical ablation of the prostate (includes ultrasonic guidance for interstitial cryosurgical probe placement)	55873	
Ablation of malignant prostate tissue, transrectal, with high intensity-focused ultrasound (HIFU), including ultrasound guidance	55880	
Transurethral waterjet ablation of prostate, including control of post-operative bleeding, including ultrasound guidance, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included when performed)	0421T	
Transurethral ablation of malignant prostate tissue by high-energy water vapor thermotherapy, including intraoperative imaging and needle guidance	0582T	

Prostatectomy	CODES:	Medicare IP Only
Prostatectomy, perineal, subtotal (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy)	55801	Y
Prostatectomy, perineal radical;	55810	Y
Prostatectomy, perineal radical; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	55812	Y
Prostatectomy, perineal radical; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	55815	Y
Prostatectomy (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy); suprapubic, subtotal, 1 or 2 stages	55821	Y
Prostatectomy (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy); retropubic, subtotal	55831	Y
Prostatectomy, retropubic radical, with or without nerve sparing;	55840	Y
Prostatectomy, retropubic radical, with or without nerve sparing; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	55842	Y
Prostatectomy, retropubic radical, with or without nerve sparing; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes	55845	Y
Laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing, includes robotic assistance, when performed	55866	
Laparoscopy, surgical prostatectomy, simple subtotal (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy), includes robotic assistance, when	55867	
Thyroid Surgery	CODES:	Medicare IP Only
Partial thyroid lobectomy, unilateral; with or without isthmusectomy	60210	
Partial thyroid lobectomy, unilateral; with contralateral subtotal lobectomy, including isthmusectomy	60212	
Total thyroid lobectomy, unilateral; with or without isthmusectomy	60220	
Total thyroid lobectomy, unilateral; with contralateral subtotal lobectomy, including isthmusectomy	60225	
Thyroidectomy, total or complete	60240	
Thyroidectomy, total or subtotal for malignancy; with limited neck dissection	60252	
Thyroidectomy, total or subtotal for malignancy; with radical neck dissection	60254	Y
Thyroidectomy, removal of all remaining thyroid tissue following previous removal of a portion of thyroid	60260	
Thyroidectomy, including substernal thyroid; sternal split or transthoracic approach	60270	Y
Thyroidectomy, including substernal thyroid; cervical approach	60271	

SLEEP MEDICINE TESTING	
Facility and Titration	CODES:
Sleep study, simultaneous recording of ventilation, respiratory effort, ECG or heart rate, and oxygen saturation, attended by a technologist	95807
Polysomnography; any age, sleep staging with 1-3 additional parameters of sleep, attended by a technologist	95808
Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	95810
Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	95811