

2017 AMA CPT CODE CHANGES

*The 2017 code changes noted below are not in the NJ fee schedule, thus will be subject to the cross-walking in the NJ fee schedule if the old code is still present or UCR. It is the professional responsibility of the provider to keep abreast of any AMA CPT Code changes.

I. Injections:

Codes 62310, 62311, 62318 and 62319 for epidural steroid injections have been eliminated. In their place effective 1/1/17 are new codes to reflect reporting when services are performed with or without imagining guidance:

Old CPT code	New code with imagining guidance	New code without imagining guidance
62310- cervical and thoracic single shot injection	62321	62320
62311- lumbar single shot injection	62323	62322
62318- cervical or thoracic epidural catheter	62325	62324
62319- lumbar epidural catheter	62327	62326

Notes: When imaging guidance or imaging supervision and interpretation is included in a procedure, guidelines for image documentation and report, included in the guidelines for radiology (including nuclear medicine and diagnostic ultrasound) will apply.

II. Spinal Codes:

CPT Code 22851 *"application of intervertebral biomechanical device(s) (eg, synthetic cage(s), methyl methacrylate) to vertebral defect or interspace (List separately in addition to code for primary procedure)"* **been deleted and replaced with the following codes:**

Replacement for 22851		
+22853	insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, angles), when performed, to intervertebral disk space in conjunction with interbody arthrodesis,	Code per each treated intervertebral disk space Example: PEEK device, low-pro- le or integrated

	each interspace (List separately in addition to code for primary procedure)	device placed in an interspace for arthrodesis
+22854	<p>Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh, methylmethacrylate) with integral anterior instrumentation for device anchoring (eg, screws, angles), when performed, to vertebral corpectomy(ies) (vertebral body resection, partial or complete) defect, in conjunction with interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)</p> <p>Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh, methylmethacrylate) to intervertebral disk space or vertebral body defect without interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)</p>	<p>Code per each contiguous corpectomy defect when there is also an arthrodesis</p> <p>Example: PEEK device, expandable cage, low-profile or integrated device placed into a corpectomy defect for arthrodesis</p> <p>Code for each contiguous disk space or corpectomy defect when there is no arthrodesis</p> <p>Example: Spinal reconstruction with prosthetic replacement of resected vertebral body without placement of bone graft</p>

- Like +22851, the new codes are add-on codes and are never appended with modifier 51 (multiple procedures).

New interlaminar/Interspinous process codes:

TABLE 3: NEW CODES FOR INSERTION OF AN INTERLAMINAR/INTERSPINOUS PROCESS	
STABILIZATION/DISTRACTION DEVICE	
Code	2017 Descriptor
Insertion of the device with open decompression	

22867	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; single level
+22868	Second level (List separately in addition to code for primary procedure).
Insertion of the device without open decompression	
22869	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; single level
+22870	Second level (List separately in addition to code for primary procedure)

Other CPT changes:

- New lumbar endoscopic decompression code—62380 (Endoscopic decompression of spinal cord, nerve root[s], including laminotomy, partial facetectomy, foraminotomy, discectomy and/or excision of herniated intervertebral disk, 1 interspace, lumbar)—is being added. This code may be reported with modifier 50 when a bilateral procedure is performed. As a result of this new code addition, code 62287, the percutaneous intervertebral disk decompression code, is being revised to remove the words "with the use of an endoscope."