



Errata and Technical Corrections – CPT® 2022

Date: December 30, 2021

The information that follows is sourced to either a publication errata or a technical correction by the CPT Editorial Panel. An errata (denoted as **E**) for the current edition of the CPT code set will publish information that was approved by the CPT Editorial Panel and inadvertently excluded from the current code set. Technical corrections (denoted as **T**) are clarifications of original Panel intent for the current code structure. All items below are errata if they are not designated as a technical correction in the right-hand column. The order of the entries on this document is by code order. Additionally, each entry shows the date of publication to this document. The links immediately following are provided as a guide to the most recently added items. **The effective date for each item is January 1, 2022.** Updates to this document are made as issues surface requiring clarification.

Most recent entries added to *Errata and Technical Corrections - CPT® 2022*

- Revise spelling of “catheterization” for code 93452 in the list of Procedural Illustrations.
- Revise the Care Management Services guidelines by removing duplicate language.
- Revise codes and parenthetical notes throughout the Posterior, Posterolateral or Lateral Transverse Process Technique subsection.
- Add “vertebral” to the code descriptor for code 63053 and revise guidelines and multiple parenthetical notes throughout the Posterior Extradural Laminotomy or Laminectomy for Exploration/Decompression of Neural Elements or Excision of Herniated Intervertebral Discs and Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression subsections.
- Revise parenthetical note in the Medicine Interactive Complexity subsection following code 90785 by removing codes 90839 and 90840.
- Revise spelling of “catheterization” and “Congenital” in the Cardiac Catheterization guidelines.
- Revise the medium descriptor data file for codes 38101, 83516, and 85044.

<p>Illustrated Anatomical and Procedural Review Lists of Illustrations Procedural Illustrations</p> <p>93452 Left Heart Catheterization</p> <p>Revise spelling of “catheterization” for code 93452 in list of Procedural Illustrations.</p>	<p>Posted 12/30/2021 E</p>
<p>Evaluation and Management Care Management Services</p> <p>Care management services are management and support services provided by clinical staff, under the direction of a physician or other qualified health care professional, or may be provided personally by a physician or other qualified health care professional to a patient residing at home or in a domiciliary, rest home, or assisted living facility. Services include establishing, implementing, revising, or monitoring the care plan, coordinating the care of other professionals and agencies, and educating the patient or caregiver about the patient’s condition, care plan, and prognosis. Care management services improve</p>	<p>Posted 12/30/2021 E</p>

<p>care coordination, reduce avoidable hospital services, improve patient engagement, and decrease care fragmentation. The physician or other qualified health care professional provides or oversees the management and/or coordination of care management services, which include establishing, implementing, revising, or monitoring the care plan, coordinating the care of other professionals and agencies, and educating the patient or caregiver about the patient’s condition, care plan, and prognosis.</p> <p>Revise the Care Management Services guidelines by removing duplicate language.</p>	
<p>Surgery Musculoskeletal System Spine (Vertebral Column) Arthrodesis Posterior, Posterolateral or Lateral Transverse Process Technique</p> <p>▲22630 Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; lumbar; (Do not report 22630 in conjunction with 22612 for the same interspace and segment, use 22633)</p> <p>+▲22632 each additional interspace (List separately in addition to code for primary procedure)</p> <p>▲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; ▶(Do not report with 22612 or 22630 for the same interspace) ◀</p> <p>+▲22634 each additional interspace and segment (List separately in addition to code for primary procedure) (Use 22634 in conjunction with 22633) ▶(Do not report 22633, 22634 in conjunction with 63030, 63040, 63042, 63047, 63052, 63053, 63056, for laminectomy performed to prepare the interspace on the same spinal interspace[s] and vertebral segment[s]) ◀ ▶(For decompression performed on the same interspace[s] and vertebral segment[s] as posterior interbody fusion that includes laminectomy, removal of facets, and/or opening/widening of the foramen for decompression of nerves or spinal components such as spinal cord, cauda equina, or nerve roots, see 63052, 63053) ◀</p> <p>Revise the Posterior, Posterolateral or Lateral Transverse Process Technique subsection by: 1) replacing semicolon with a comma following “interspace” and adding a semicolon following “lumbar” to the code descriptor for code 22630; 2) replacing semicolon with a comma following “interspace” and adding semicolon following “lumbar” to the code descriptor for code 22633; 3) removing “and segment” from the code descriptor for code 22634; and 4) revising two parenthetical notes following code 22634 by adding “and vertebral segment[s]”.</p>	<p>Posted 12/30/2021 T</p> <p>Posted 12/30/2021 T</p>
<p>Surgery Nervous System Spine and Spinal Cord Posterior Extradural Laminotomy or Laminectomy for Exploration/Decompression of Neural Elements or Excision of Herniated Intervertebral Discs</p>	<p>Posted 12/30/2021 T</p>

63020	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; 1 interspace, cervical (For bilateral procedure, report 63020 with modifier 50)
+63035	each additional interspace, cervical or lumbar (List separately in addition to code for primary procedure) (Use 63035 in conjunction with 63020-63030) ▶(Do not report 63030, 63035 in conjunction with 22630, 22632, 22633, 22634, for laminotomy performed to prepare the interspace for fusion on the same <u>spinal interspace[s] and vertebral segment[s]</u>) ◀ ▶(For decompression performed on the same interspace[s] and vertebral segment[s] as posterior interbody fusion that includes laminectomy, removal of facets, and/or opening/widening of the foramen for decompression of nerves or spinal components, such as spinal cord, cauda equina, or nerve roots, see 63052, 63053) ◀ (For bilateral procedure, report 63035 twice. Do not report modifier 50 in conjunction with 63035) (For percutaneous endoscopic approach, see 0274T, 0275T)
63040	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; cervical (For bilateral procedure, report 63040 with modifier 50)
+63044	each additional lumbar interspace (List separately in addition to code for primary procedure) (Use 63044 in conjunction with 63042) ▶(Do not report 63040, 63042, 63043, 63044 in conjunction with 22630, 22632, 22633, 22634, for laminotomy to prepare the interspace for fusion on the same interspace[s] and vertebral segment[s]) ◀ ▶(For decompression performed on the same <u>vertebral segment[s] and/or interspace[s] and vertebral segment[s]</u> as posterior interbody fusion that includes laminectomy, removal of facets, and/or opening/widening of the foramen for decompression of nerves or spinal components such as spinal cord, cauda equina, or nerve roots, see 63052, 63053) ◀ (For bilateral procedure, report 63044 twice. Do not report modifier 50 in conjunction with 63044) ▶Decompression performed on the same <u>interspace(s) and vertebral segment(s) and/or interspace(s)</u> as posterior interbody fusion that includes laminectomy, facetectomy, or foraminotomy may be separately reported using 63052. Codes 63052, 63053 may only be reported for decompression at the same anatomic site(s) when posterior interbody fusion (eg, 22630) requires decompression beyond preparation of the interspace(s) for fusion. ◀
63045	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; cervical
63046	thoracic
63047	lumbar

<p>+▲63048</p> <p>each additional vertebral segment, cervical, thoracic or lumbar (List separately in addition to code for primary procedure)</p> <p>(Use 63048 in conjunction with 63045-63047)</p> <p>(Do not report 63047, 63048 in conjunction with 22630, 22632, 22633, 22634, for laminectomy performed to prepare the interspace for fusion on the same interspace[s] and vertebral segment[s] and/or interspace[s])</p> <p>(For decompression performed on the same interspace[s] and vertebral segments and/or interspace[s] as posterior interbody fusion that includes laminectomy, removal of facets, and/or opening/widening of the foramen for decompression of nerves or spinal components, such as spinal cord, cauda equina, or nerve roots, see 63052, 63053)</p> <p>#+●63052</p> <p>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)</p> <p>#+●63053</p> <p>each additional vertebral segment (List separately in addition to code for primary procedure)</p> <p>▶(Use 63053 in conjunction with 63052) ◀</p> <p>▶(Use 63052, 63053 in conjunction with 22630, 22632, 22633, 22634) ◀</p> <p>Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression</p> <p>63055</p> <p>Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; thoracic</p> <p>63056</p> <p>lumbar (including transfacet, or lateral extraforaminal approach) (eg, far lateral herniated intervertebral disc)</p> <p>+63057</p> <p>each additional segment, thoracic or lumbar (List separately in addition to code for primary procedure)</p> <p>(Use 63057 in conjunction with 63055, 63056)</p> <p>▶(Do not report 63056, 63057 for a herniated disc in conjunction with 22630, 22632, 22633, 22634 for decompression to prepare the interspace on the same interspace[s] and vertebral segment[s]) ◀</p> <p>▶(For decompression performed on the same interspace[s] and vertebral segment[s] as posterior interbody fusion that includes laminectomy, removal of facets, or opening/widening of the foramen for decompression of nerves or spinal components such as spinal cord, cauda equina, or nerve roots, see 63052, 63053) ◀</p> <p>Add “vertebral” to the code descriptor for code 63053 and revise guidelines and multiple parenthetical notes throughout the Posterior Extradural Laminotomy or Laminectomy for Exploration/Decompression of Neural Elements or Excision of Herniated Intervertebral Discs and Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression subsections.</p>		
<p>Pathology and Laboratory Microbiology</p> <p>▲87324 Clostridium difficile toxin(s)</p> <p>(For Cryptococcus latex agglutination, use 86403)</p> <p>▲87327 Cryptococcus neoformans</p>		<p>Posted 11/05/2021 E</p>

<p>(For Cryptococcus latex agglutination, use 86403)</p> <p>Relocated parenthetical note in the Pathology and Laboratory Microbiology subsection following code 87324 to follow code 87327.</p>	
<p>Medicine Psychiatry Interactive Complexity</p> <p>★+90785 Interactive complexity (List separately in addition to the code for primary procedure)</p> <p>▶(Use 90785 in conjunction with codes for diagnostic psychiatric evaluation [90791, 90792], psychotherapy [90832, 90833, 90834, 90836, 90837, 90838], and group psychotherapy [90853]) ◀</p> <p>▶(Use 90785 in conjunction with 90853 for the specified patient when group psychotherapy includes interactive complexity) ◀</p> <p>▶(Do not report 90785 in conjunction with 90839, 90840, psychological and neuropsychological testing [96130, 96131, 96132, 96133, 96134, 96136, 96137, 96138, 96139, 96146], or E/M services when no psychotherapy service is also reported) ◀</p> <p>(Do not report 90785 in conjunction with 90839, 90840, 97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158, 0362T, 0373T)</p> <p>Revise parenthetical note in the Medicine Interactive Complexity subsection following code 90785 by removing code 96134. (10/04/2021)</p> <p>Revise parenthetical note in the Medicine Interactive Complexity subsection following code 90785 by removing codes 90839 and 90840. (12/30/2021)</p>	<p>Posted 10/04/2021 E</p> <p>Posted 12/30/2021 T</p>
<p>Medicine Cardiovascular Cardiac Catheterization</p> <p>▶Cardiac catheterization is a diagnostic medical procedure which includes introduction, positioning and repositioning, when necessary, of catheter(s), within the vascular system, recording of intracardiac and/or intravascular pressure(s), and final evaluation and report of procedure. There are two code families for cardiac catheterization: one for congenital heart disease and one for all other conditions. For cardiac <u>catheterization</u> for congenital heart defects (93593, 93594, 93595, 93596, 93597, 93598), see the Medicine/Cardiovascular/Cardiac Catheterization for Congenital Heart Defects subsection. The following guidelines apply to cardiac catheterization performed for indications other than the evaluation of congenital heart defects.</p> <p>Right heart <u>catheterization</u> for indications other than the evaluation of congenital heart defects (93453, 93456, 93457, 93460, 93461): includes catheter placement in one or more right-sided cardiac chamber(s) or structures (ie, the right atrium, right ventricle, pulmonary artery, pulmonary wedge), obtaining blood samples for measurement of blood gases, and cardiac output measurements (Fick or other method), when performed. For placement of a flow directed catheter (eg, Swan-Ganz) performed for hemodynamic monitoring purposes not in conjunction with other catheterization services, use 93503. Do not report 93503 in conjunction with other diagnostic cardiac catheterization codes. Right heart catheterization does not include right ventricular or right atrial angiography (93566).</p>	<p>Posted 12/30/2021 E</p>

<p>Revise spelling of “catheterization” and “Congenital” in the Cardiac Catheterization guidelines.</p> <p>Medicine Non-Face-to-Face Remote Therapeutic Monitoring Treatment Management Services</p> <p>Do not count any time on a day when the physician or other qualified health care professional reports an E/M service (office or other outpatient services [99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215], domiciliary, rest home services [99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337], home services [99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350], inpatient services [99221, 99222, 99223, 99231, 99232, 99233, 99251, 99252, 99253, 99254, 99255]).</p> <p>Do not count any time related to other reported services (eg, psychotherapy services [90832, 90833, 90834, 90836, 90837, 90838], interrogation device evaluation services [93290], anticoagulant management services [93793], respiratory monitoring services [94774, 94775, 94776, 94777], health behavior assessment and intervention services [96156, 96158, 96159, 96160, 96161, 96164, 96165, 96167, 96168, 96170, 96171], therapeutic interventions that focus on cognitive function services [97129, 97130], adaptive behavior treatment services [97153, 97154, 97155, 97156, 97157, 97158], therapeutic procedures [97110, 97112, 97116, 97530, 97535], tests and measurements [97750, 97755], physical therapy evaluation services [97161, 97162, 97163, 97164], occupational therapy evaluations [97165, 97166, 97167, 97168], orthotic management and training and prosthetic training services [97760, 9766497761, 97763], medical nutrition therapy services [97802, 97803, 97804], medication therapy management services [99605, 99606, 99607], critical care services [99291, 99292], principal care management services [99424, 99425, 99426, 99427]) in the cumulative time of the remote therapeutic monitoring treatment management service during the calendar month of reporting.</p> <p>Revise guideline to replace code 97661 with code 97761 in the Medicine Remote Therapeutic Monitoring Treatment Management Services subsection.</p>	<p>Posted 11/05/2021 E</p>
<p>Index Cardiac Catherization Congenital Cardiac Defect(s) With Cardiac Output Measurement Right and Left..... 93536, 9353793596, 93597</p> <p>Revise index to replace codes 93536 and 93537 with codes 93596 and 93597 to identify right and left cardiac catheterization for congenital cardiac defects.</p>	<p>Posted 10/04/2021 E</p>
<p>Index Debridement Metacarpophalangeal joint..... 29901 Metatarsophalangeal joint..... 28289, 28291, 29901, 29902</p> <p>Add subheading “Metacarpophalangeal joint” and code 29901 to identify debridement of the metacarpophalangeal joint and remove codes “29901, 29902” from the Metatarsophalangeal joint subheading in the CPT index.</p>	<p>Posted 10/04/2021 E</p>
<p>Index Log Hydrogen Ion Concentration Blood Gases, pH..... 8200082800, 82803, 82930</p> <p>Revise index to replace code 82000 with code 82800 to identify the blood gases, pH.</p>	<p>Posted 10/04/2021 E</p>
<p>Index Operation/Procedure Kroenlein Procedure..... 67420, 6745567445</p>	<p>Posted 10/04/2021 E</p>

Revise index to replace code 67455 with code 67445 to identify a Kroenlein procedure.	
Index Prolastin Alpha-1 Antitrypsin..... 83103, 83104 <u>82103, 82104</u>	Posted 10/04/2021 E
Revise index to replace codes 83103 and 83104 with codes 82103 and 82104 to identify Prolastin alpha-1 antitrypsin.	
Index PSA (Prostate Specific Antigen)..... 85152-85154 <u>84152-84154</u>	Posted 10/04/2021 E
Revise index to replace code range 85152-85154 with code range 84152-84154 to identify prostate specific antigens.	
Index Reconstruction Fallopian Tube Tubouterine Implantation..... 58755 <u>58752</u>	Posted 10/04/2021 E
Revise index to replace code 58755 with code 58752 to identify tubouterine implantation.	
Index Resection Tumor Urethra..... 52235-52334 <u>52234, 52235</u> , 52240, 52355	Posted 10/04/2021 E
Revise index to replace code range 52235-52334 with codes 52234 and 52235 to identify urethral tumor resection.	
Index Test Hemagglutination Inhibition..... 86862 <u>86280</u>	Posted 10/04/2021 E
Revise index to replace code 86862 with code 86280 to identify hemagglutination inhibition testing.	
Medium Descriptor Data File 28062 FASCI <u>E</u> COTOMY PLANTAR FASCIA RADICAL SPX Revise the medium descriptor data file for code 28062.	Posted 10/04/2021 E
Medium Descriptor Data File 38101 SPLENECTOMY TOTAL <u>PARTIAL</u> EN-BLOC W/ OTHER <u>SEPARATE</u> PROCEDURE Revise the medium descriptor data file for code 38101.	Posted 12/30/2021 E
Medium Descriptor Data File 83516 IMMUNOASSAY ANALYTE QUAL/SEMIQUAL <u>N</u> MULTIPLE STEP Revise the medium descriptor data file for code 83516.	Posted 12/30/2021 E
Medium Descriptor Data File 85044 BLOOD COUNT RETICULOCYTE AUTOMATED <u>MANUAL</u> Revise the medium descriptor data file for code 85044.	Posted 12/30/2021 E

<p>Medium Descriptor Data File 95249 CONT GLUC MONITORING PATIENT PROVIDED EQUIPMENT Revise the medium descriptor data file for code 95249.</p>	<p>Posted 11/05/2021 E</p>
<p>Medium Descriptor Data File 95250 CONT GLUC MNTR PHYSICIAN/QHP PROVIDED EQUIPMENT Revise the medium descriptor data file for code 95250.</p>	<p>Posted 11/05/2021 E</p>