



Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

The proposed agenda for the September 2025 CPT Editorial Panel meeting shows the code application names, code(s) affected, and a description of the request. The Code Numbers and Request Descriptions detailed in this document are extracted from Code Applications submitted for discussion at this meeting. **Until such time as the CPT Editorial Panel acts on these requests, the information that appears in this Proposed Agenda is provided for informational purposes only, giving interested individuals the information to help determine whether or not to attend the meeting and provide comment on a given topic(s).**

Codes that contain an 'X' (e.g., 102X4, 2342X, 130XT) below are placeholder codes that are intended, through the first three digits, to give readers an idea of the proposed placement in the code set of the potential code changes. **These codes are not used for claims reporting and will be removed and not retained when the final CPT Datafiles are distributed September of each year. To report the services for "X" codes listed on this form, please refer to the actual codes as they appear in the CPT Datafiles publication distributed early September of the corresponding year.**

INTERESTED PARTY PROCESS

Upon review of this agenda, if the reviewer believes that they may want to provide written comments on an application, the reviewer must seek Interested Party status by submitting a request form. The form requires identification of the potential Interested Party, a brief summary of the basis for the request (e.g., associated vendor/ industry representative), and signature of the confidentiality agreement and disclosure of interest forms. For more information, [please visit our website](#).

Only requests submitted via the CPT Smart App's [Interested Party Portal](#) will be considered.

IMPORTANT UPDATE

We want to inform you that the deadline for interested party (IP) comments has been updated. The new deadline to submit comments for the upcoming September 2025 meeting was August 12, 2025.

This adjustment allows more time for thorough review by Editorial Panel members, as well as aligns with the CPT Advisor comment deadline. We hope this change will accommodate all involved in the CPT Editorial Panel process.

Any recognized Interested Party who provides written comments must do so no later than the deadlines below and in the Interested Party Portal. Should you miss the **August 12th deadline**, verbal comments can be provided in person at the Panel meeting.

Written comments must be submitted via the CPT Smart App's [Interested Party Portal](#).

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Issues	Tabs	Comments Deadline (Noon, CST)	Deadline to Request Materials <i>*NEW: you may request materials through Friday of the Panel Meeting.</i>
All Non-Pathology Issues	4-42, 48-95	August 12, 2025	September 12, 2025
Path/Lab	43-47	July 25, 2025	September 12, 2025

During the time between now and the Panel meeting, the agenda will more than likely be modified to reflect changes (additions, deletions, or updates). Please check back frequently for the most up to date information. Outcomes on these actions will be found in the CPT Editorial Panel Summary of Actions for the September 2025 meeting which will be published on or before October 3, 2025, to the [AMA website](#).

Tab	Name	Code #	Request-Description
4	Severe Obesity Surgical Complexity	+ ● 100X1 + ● 100X2 + ● 100X3 + ● 100X4	Request for new heading, guidelines and establish add-on codes 100X1, 100X2, 100X3, 100X4.
5	3D Printed Autograft-Revise 15150-15157	-----	WITHDRAWN
6	Skin Cell Suspension Autograft	● 15X19 ● 15X20 ● 15X21 ● 15X22 D15011 D15012 D15013 D15014 D15015 D15016	Establish 15X19, 15X20, 15X21, 15X22 for skin cell suspension procedures and delete 15011-15018.

Updated August 15, 2025

● New
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Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
		D15017 D15018	
7	Osteotomy Guideline Revisions, Spine 22210-22216	-----	Establish additional guidelines in the spine (vertebral column)/ Osteotomy subsection; add a parenthetical note following code 22216; and revise the clinical vignettes for codes 22210, 22212, 22214, 22216.
8	Cat III to Cat I-Posterior Vertebral Column Arthroplasty-0202T	-----	WITHDRAWN
9	Cat III-Sclerotherapy and Grafting of Bone Cyst	-----	WITHDRAWN
10	Arthroscopic Osteochondral Allograft Transplantation, Elbow	-----	TERMINATED
11	Periacetabular Osteotomy (PAO)	-----	WITHDRAWN
12	Implantation Extra-articular Shock Absorber, Medial Knee	-----	WITHDRAWN
13	Implantation Extra-articular Shock Absorber, Medial Knee	● 27X05	Establish Category I code 27X05 to report open implantation of a medial knee extraarticular shock absorber.
14	Osteochondral Acellular Scaffold Implantation, Knee	● 27XX8	Establish Category I code 27XX8 for reporting open cartilage knee repair procedure with an osteochondral acellular scaffold implant(s).
15	Multiple Epiphyseal Drilling, Pediatric and Adolescent	-----	TERMINATED

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
16	Arthrodesis with Sustained Dynamic Decompression, Foot and Ankle	-----	WITHDRAWN
17	Extra-articular Talotarsal Joint Stabilization	●28XX1	Establish Category I code 28XX1 to report extra-osseous stabilization of talotarsal joint.
18	Cat III to Cat I-0571T-0580T 0614T-Extravasc Implntble Cardioverter Defib Pxs	▲33270 D0573T ▲33271 D0574T ▲33272 D0575T ▲33273 D0576T ▲93260 D0577T ▲93261 D0578T ▲93644 D0579T D0571T D0580T D0572T D0614T	Delete Category III codes 0571T-0580T, 0614T and Revise Category I codes 33270-33273, 93260-93264 and all related guidelines and parenthetical notes to allow reporting all of non-vascular implantable cardioverter defibrillator (ICD) systems within existing codes.
19	Insertion and Removal of Surgical Ventricular Assist Device	●33X10 ●33X11 ●33X12 ●33X13 ●33X14	Establish Category I codes 33X10- 33X14 and revise the guidelines for the cardiovascular system.
20	Cat III to Cat I-Transcatheter Tricuspid Valve Implant (TTVI)-0646T	●33X50 D0646T	Delete Category III code 0646T and establish Category 1 code 33X50 for TTVI.
21	Cat III to Cat I-Transcath Tricuspid Edge-to-Edge Repair (T-TEER)-0569T, 0570T	●33X51 ●33X52 D0569T	Delete Category III codes 0569T, 0570T and establish Category 1 codes 33X51, 33X52 for T-TEER.

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
		D0570T	
22	Central Venous Catheter Insertion Services	<ul style="list-style-type: none"> ● 36XX0 ▲36558 ● 36X10 ▲36560 ● 36X11 ▲36561 ● 36X12 ▲36565 ● 36X13 ▲36566 ● 36X14 D36557 ● 36X15 D36563 ● 36X16 ● 36X17 	Establish Category I codes 36XX0, 36X10-36X17 to report insertion of tunneled centrally inserted central venous catheter; revise Category I codes 36558, 36560, 36561, 36565, 36566 and delete category I codes 36557 and 36563.
23	Cat III to Cat I-Renal Nerve Denervation-0338T, 0339T	<ul style="list-style-type: none"> ● 3XXX3 ● 3XXX4 D0338T D0339T 	Delete Category III codes 0338T, 0339T and establish Category I codes 3XXX3, 3XXX4 to report transcatheter renal sympathetic denervation, percutaneous.
24	Microvascular Bypass, Lymphatic Vessels	<ul style="list-style-type: none"> ● 38X03 ● 38X04 	Establish Category I codes 38X03, 38X04 to report lymphovenous bypass procedures.
25	Laparoscopic Duodenal Switch	-----	WITHDRAWN
26	Diaphragmatic Hernia Repair	<ul style="list-style-type: none"> ● 39XX3 ● 39X10 ● 39XX4 ● 39X11 ● 39XX5 ● 39X12 ● 39XX6 ● 39X13 ● 39XX7 ▲39540 	Establish Category I codes 39XX3-39X13 and revise 39540, 39541 to report open and laparoscopic diaphragmatic hernia repair

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
		● 39XX8 ▲ 39541 ● 39XX9	
27	EGD with Balloon Distention Study	-----	WITHDRAWN
28	Cat III to Cat I-Remote Patient Multi-day Uroflowmetry-0811T 0812T	● 51XX2 D0811T D0812T	Delete Category III codes 0811T and 0812T and establish Category I code 51XX2 to report remote, complex, multi-day uroflowmetry.
29	Prostate Biopsy Services	▲ 55XX00 +▲ 5XX07 ▲ 55XX01 ▲ 5XX09 ▲ 55XX02 ▲ 5XX10 ▲ 55XX03 D55706 ▲ 5XX04 D55708	Revise transrectal and transperineal prostate biopsy codes 5XX00-5XX04, 5XX07, 5XX09, 5XX10 to: (1) reflect regional provision of biopsy (5XX00-5XX03); (2) include imaging guidance and/or fusion targeting of lesions (5XX00-5XX04, 5XX09); (3) revise 5XX07 as an add-on code for non-regional transrectal/transperineal procedures (5XX04); (4) delete 5XX08 and [55706] to accommodate changes; and (5) include 5XX07, 5XX10 as child codes.
30	Maternity Care Services	● 59XX1 D59400 ● 59XX2 D59409 ● 59XX3 D59410 ● 59XX4 D59425 ● 59XX5 D59426 ● 59XX6 D59430 ● 59XX7 D59050 ● 59XX8 D59510 ● 59XX9 D59514 ● 59X10 D59515 ● 59X11 D59525	Establish codes 59XX1-59X12; revise codes 59051, 59300, 59412; delete codes 59050, 59400, 59409, 59410, 59425, 59426, 59430, 59510, 59514, 59515, 59525, 59610, 59612, 59614, 59618, 59620, 59622 and revise guidelines throughout the Maternity Care section.

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
		<ul style="list-style-type: none"> ● 59X12 D59610 ▲ 59412 D59612 ▲ 59050 D59614 ▲ 59051 D59618 ▲ 59300 D59620 D59622 	
31	Insertion of Cervical Dilator	-----	WITHDRAWN
32	Cranial Nerve Neurostimulator Parenthetical Instructions	-----	Revise parenthetical notes associated with cranial nerve neurostimulator codes to better differentiate reporting according to the type of cranial nerve
33	Lumbar Paravertebral Block/Paraspinous Block Parenthetical Note	▲ 64462	Delete parenthetical note following [64462] that restricts reporting more than one time per day (1x/day)
34	Cat III to Cat I-Tibial Neurostimulation Services-0816T-0819T	<ul style="list-style-type: none"> ● 64X01 ● 64X02 D0816T D0817T D0818T D0819T D0400T D0401T 	Delete Category III codes 0816T-0819T; 0400T, 0401T; and establish Category I codes 64X01, 64X02 to report posterior tibial nerve integrated neurostimulation system services subcutaneously, subfascially, or both.
35	Cat III to Cat I - Open Posterior Tibial Neurostimulator Services-0816T-0819T	<ul style="list-style-type: none"> ● 64X26 D0816T ● 64X27 D0817T ● 64X28 D0818T ● 64X29 D0819T 	Delete Category III codes 0816T-0819T w/ parenthetical notes and establish Category I codes 64X26-64X29 w/ parenthetical instructions for reporting posterior tibial nerve integrated neurostimulation system.

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
36	Integrated Neurostimulator	-----	WITHDRAWN
37	Biopsy, Eyelid-Revise 67810	-----	WITHDRAWN
38	MRA-Head, Neck	<ul style="list-style-type: none"> ● 70XX4 ● 70XX5 ● 70XX6 ▲ 70544 ▲ 70545 ▲ 70546 ▲ 70547 ▲ 70548 ▲ 70549 	Revise Category I codes 70544-70549 to include image postprocessing head and/or neck and establish Category I codes 70XX4-70XX6 for reporting magnetic resonance angiography with/without contrast.
39	Cat III to Cat I-Near Infrared Spectroscopy-0640T, 0859T	-----	WITHDRAWN
40	AI Augmentative Analysis, Volumetric Breast Density	● 77X11	Establish Category I code 77X11 for augmentative analysis for volumetric breast density
41	Augmentative Analysis CCTA Bundle	-----	WITHDRAWN
42	PET and CT, Brain-Revise 78608	-----	WITHDRAWN
43	GSP-Genetic Testing, Heritable Renal Conditions	-----	WITHDRAWN

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
44	GSP-Genetic Testing, Heritable Immune Conditions	●8XX17	Establish code 8XX17 to report genetic testing for heritable immune conditions.
45	GSP-Alport Syndrome	●8XX19	Establish code 8XX19 to report Alport Syndrome genetic testing.
46	Admin MAAA-Response to Immunotherapy, Bladder (NMIBC)	●0X03M	Establish Administrative MAAA code 0X03M to report oncologic bladder testing using an algorithm to predict patient response to use of BCG as immunotherapy for non-muscular bladder cancer.
47	Admin MAAA-Gastrointestinal Neuroendocrine Disorders-Del 0007M	D0007M	Delete 0007M for reporting a PCR expression analysis algorithm for tumor disease index.
48	Biofeedback Training	●90X03 ▲90901	Revise 90901, establish 90X03, and establish new guidelines/parenthetical notes to better specify reporting for biofeedback services.
49	Sleep Medicine Testing Guidelines	-----	Revise Sleep Medicine Testing Guidelines regarding technologist and QHP.
50	Video Head Impulse Test (vHIT) - Vestibular Function	●92X10 ●92X11	Establish Category I codes 92X10 and 92X11 reporting Video head impulse test
51	Cat III to Cat I-Optical Coherence Tomography, Middle Ear 0485T-0486T	●92X15 ●92X16 D0485T D0486T	Delete Category III codes 0485T, 0486T and establish Category I codes 92X15, 92X16 to report optical coherence tomography (OCT) of the middle ear for unilateral and bilateral.
52	Speech-Language Pathology Services	●92X0X ●92X6X ●92X1X ●92X7X ●92X2X ●92X8X ●92X3X ●92X9X ●92X4X ▲92508	Delete 92507, establish 92X0X-92X9X for speech-language related disorders to provide specificity of the various services in the code descriptors, revise 92508.

Updated August 15, 2025

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Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
		●92X5X D92507	
53	Mobile Cardiovascular Telemetry	-----	WITHDRAWN
54	Cat III to Cat I-Augmentative AI-Coronary Fractional Flow Reserve-FFRangio-0523T	●93X8X + ●93X7X D0523T	Delete Category III code 0523T and establish Category I code 93X8X to report intraprocedural performance of coronary Fractional Flow Reserve (FFR); add an add-on Category I 93X7X code to report the performance of coronary FFR using data from a previously performed coronary angiogram; and delete.
55	Therapeutic Magnetic Stimulation, Neuronavigation	-----	WITHDRAWN
56	Adaptive Behavior Services Revisions	●97XX1 D0362T ●97XX2 D0363T ●97XX3 D0364T ●97XX4 D0365T ●97XX5 D0366T ▲97151 D0367T ▲97152 D0368T ▲97153 D0369T ▲97154 D0370T ▲97155 D0371T ▲97156 D0372T ▲97157 D0373T ▲97158	Establish 97XX1-97XX5 and revise guidelines and parenthetical notes to clarify reporting for adaptive behavior assessment and treatment, revise 97151-97158 and delete 0362T, 0373T.

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
57	Cat III to Cat I-Real-Time Fluorescence Wound Imaging-0598T, 0599T	● 976XX D0598T D0599T	Delete Category III codes 0598T, 0599T and establish Category I code 976XX reporting real-time fluorescence wound imaging.
58	Remote Therapeutic Monitoring, Oncology	● 98XX9 ● 98X10	Establish two Category I codes 98XX9, 98X10 to report device supply for monitoring for cancer therapy.
59	Cat III-Photobiomodulation Therapy, Deep Tissue	● X496T ● X497T	Establish Category III codes X496T, X497T for photobiomodulation for pelvic pain.
60	Cat III-Micro-incision, Peripheral Artery or Vein	-----	WITHDRAWN
61	Cat III-Allograft Reinforcement, Intraocular Spacer Implantation	-----	WITHDRAWN
62	Cat III-Transvenous Phrenic Neurostimulation Therapy	● X499T ● X500T ● X501T ● X502T	Establish Category III codes X499T, X500T, X501T, X502T for transvenous phrenic neurostimulation services.
63	Cat III-AI Autonomous Genetic Counseling Service	-----	WITHDRAWN
64	Cat III-Pulsatile Intravenous Insulin Therapy	● X513T	Establish Category III code X513T to report pulsatile intravenous insulin therapy.
65	Cat III-Surface Mesh Volume	● X421T + ● X422T	Establish Category III codes X421T-X426T for surface mesh volume procedures with new guidelines.

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D Deletion

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
		<ul style="list-style-type: none"> ● X423T + ● X424T ● X425T + ● X426T 	
66	Cat III-Noninvasive Augmentative AI Hemodynamic Assessment	● X486T	Establish Category III code X486T for reporting augmentative AI analysis including acquisition of cardiovascular signals utilizing noninvasive hemodynamic assessment.
67	Cat III-Histotripsy, Pancreatic Tissue	● X487T	Establish Category III code X487T to report use of histotripsy non-thermal ablation of malignant pancreatic tissue.
68	Cat III-Intraocular Drug Delivery Implant	-----	WITHDRAWN
69	Cat III-Cryotherapy with Passive Cooling Device, Oral Cavity	● X511T	Establish Category III code X511T to report cryotherapy of the oral cavity using a passive cooling device.
70	Cat III-AI Augmentative Analysis, Dermatologic Condition Assessment	● X532T	Establish Category III code X532T to report Artificial intelligence augmentative analysis for dermatologic conditions.
71	Cat III-Autologous Muscle Cell Therapy, Tongue	● X488T	Establish Category III code X488T to report esophagoscopy autologous muscle cell therapy, administration of muscle progenitor cells into the tongue.
72	Cat III-AI Software Identification-ST Elevation Myocardial Infarction	● X503T	Establish Category III code X503T for AI identification of ST elevation MI.
73	Cat III-Microneedle Electrode Array-PENS	-----	WITHDRAWN

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
74	Cat III-Hypothermic Oxygenated Perfusion, Liver	<ul style="list-style-type: none"> ● X490T ● X491T ● X492T 	Establish Category III codes X490T, X491T, X0492T to report hypothermic oxygenated perfusion and decannulation of the liver allograft.
75	Cat III-Caval Valve Implant (CAVI) GdIn Revisions	-----	Revise the introductory guideline in the Category III section for caval valve implantation (CAVI).
76	Cat III - AI Augmentative Analysis, Autonomic Nervous System Function	● X514T	Establish Category III code X514T to report testing of autonomic nervous system function using a 4 lead ECG and augmentative AI to predict patient response to therapy.
77	Cat III-AI Augmentative Analysis of Echocardiogram Measurements	● X533T	Establish Category III code X533T to report Artificial intelligence augmentative analysis of echocardiogram measurements.
78	Cat III-Augmentative Connectomic Analysis, Brain	● X529T	Establish guidelines and Category III code X529T to report augmentative software for the analysis of the location and function of a patient's brain networks.
79	Cat III-Selective Therapeutic Demyelination, Genicular Nerve	● X493T	Establish Category III code X493T for reporting selective therapeutic induction demyelination of the genicular nerve branches.
80	Cat III-Bronchial Cryotherapy	● X534T	Establish Category III X534T code to report bronchial cryotherapy.
81	Cat III-Algorithmic Analysis EEG	● X504T	Establish Category III code X504T for AI algorithmic analysis of data from EEG.
82	Cat III-Single-Day Transcranial Magnetic Stimulation Therapy	● X535T	Establish Category III code X535T to report transcranial magnetic stimulation.
83	Cat III-Non-Invasive Intracranial Pressure Monitoring	-----	WITHDRAWN

Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
84	Cat III-Algorithmic Analysis of Acute or Chronic Congestive Heart Failure	-----	WITHDRAWN
85	Cat III-Bone Marrow Aspirate Concentrate (BMAC) and Hyaluronic Acid Scaffold Pxs	-----	WITHDRAWN
86	Cat III-Absorbable Urologic Scaffold	●X494T	Establish Category III code X494T for reporting reconstruction of bladder neck and urethral anastomosis using implantation of absorbable urologic scaffold for prosthetic urethra restoration?
87	Cat III-Quantitative Magnetic Resonance Analysis, Liver Tissue	●X495T	Establish Category III code X495T for reporting quantitative magnetic resonance for analysis of liver tissue
88	Cat III-Software-based Pulmonary Ventilation and Perfusion Analysis	-----	WITHDRAWN
89	Cat III-Autologous Heterogenous Skin Construct Graft	●X505T ●X506T ●X507T ●X508T ●X509T ●X510T	Establish Category III codes X505T-X510T for autologous heterogenous skin construct graft procedures.
90	Cat III-Intraoperative Stimulation, Peripheral Nerves-Revise 0882T	▲0882T	Revise Category III code 0882T to allow intraoperative therapeutic electrical stimulation of peripheral nerve for nerve regeneration on upper and lower extremity nerve.
91	Cat III-Normothermic Perfusion Services	●X537T ▲0894T ▲0895T ▲0896T	Establish Category III code X537T reporting normothermic perfusion services and revise Category III codes 0894T, 0895T, 0896T.

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Proposed Panel Agenda

September 2025 CPT® Editorial Panel Meeting

Tab	Name	Code #	Request-Description
92	Cat III-Heart Failure Decompensation Monitor Services	<ul style="list-style-type: none"> ● X523T ● X524T ● X525T ● X526T ● X527T ● X528T 	Establish Category III codes X523T-X528T for heart failure decompensation monitor services.
93	Cat III-Augmentative AI for Transcranial Magnetic Stimulation	<ul style="list-style-type: none"> ● X538T ● X539T 	Establish Category III codes X538T and X539T to report augmentative AI for transcranial magnetic stimulation
94	Clinically Meaningful Algorithmic Analyses – For Discussion Only	-----	Proposal for discussion only of a new category of CPT codes for algorithmic services that do not include traditional interpretative physician or other qualified health care professional (QHP) work.
95	Care Management Guideline Revisions	-----	Editorially revise the Care Management Services guidelines; add two new definitions that apply to the Care Management Services section; Revise the Chronic Care Management Services subsection, the Complex Chronic Care Management Services subsection and the Principal Care Management Services subsection guidelines to clarify physician and other qualified health care professional time; revise the following tables: Table for Reporting Chronic Care Management Services, Complex Chronic Care Management Services timetable, and Principal Care Management Services timetable.