



## CPT 2027 Anticipated Code Changes

Several new and revised radiology Category I codes will be available including magnetic resonance angiography (MRA) of the head and neck, prostate biopsy services, and intraosseous fiducial marker placement. This article provides an overview of the anticipated changes in 2027.

Additionally, new Category III codes that describe new technologies for pancreatic histotripsy, quantitative MR analysis of hepatic steatosis, digital three-dimensional (3D) modeling, ultrasonic propulsion clearance of urinary calculi, and quantitative transmission volumetric ultrasound tomography of the breast will be available for reporting on July 1, 2026.

The ACR urges its members to review and consider how the new code changes may impact their practices.

## CPT 2027 CODE SET: NEW CATEGORY I CODES

New Category I codes will be available January 1, 2027, and are summarized below.

### Magnetic Resonance Angiography (MRA) of the Head and Neck

Codes 70544 and 70547 were identified by the Relativity Assessment Workgroup (RAW) of the AMA/Specialty Society Relative Value Society (RVS) Update Committee (RUC) as being reported together 75% or more of the time. Therefore, these codes were referred to the CPT Editorial Panel (the Panel) for bundling. To facilitate correct coding and address utilization patterns, the head and neck MRA code family (70544-70549) will be revised in 2027.

Three new codes will be available to report MRA of the head and neck without and/or with contrast. Codes 70544-70549 will be revised to include postprocessing of angiographic images.



## Intraosseous Fiducial Marker Placement

Intraosseous fiducial marker placement with imaging guidance will be reported with two new codes. Intraosseous fiducial markers are placed prior to surgery (eg, spine surgery) to assist surgeons by reducing the rate of wrong-level and wrong-site surgeries, as well as decreasing operating room time.

## Prostate Biopsy Services

Codes 55700 and 76872 were identified by the RAW screen as performed by the same physician on the same date of service 75% or more of the time and, therefore, referred to the Panel for bundling and restructuring.

The RUC determined that the prostate biopsy codes created and restructured for the CPT 2026 code set needed clarity, therefore the entire code family was referred back to the Panel. For 2027, codes 55707-55712, 55714, and 55715 will be editorially revised, and codes 55706 and 55713 will be deleted.

## CATEGORY III CODES

The following Category III codes will be available for reporting on July 1, 2026.

## Ultrasonic Propulsion Clearance of Urinary Calculi

A new code has been created to report ultrasonic propulsion clearance of urinary calculi.

This noninvasive treatment is used to facilitate stone passage and clear stone fragments during lithotripsy. This procedure uses an ultrasound device to deliver low-amplitude, low-frequency ultrasound acoustic energy bursts for extended periods of time, forcing fragments or small stones to move away from the ultrasound transducer, facilitating propulsion of the stone that fails to pass spontaneously during the postoperative period. This procedure may also be used to treat small asymptomatic renal or ureteral calculi to expedite passage or prevent a future increase in stone volume.



## Quantitative Transmission Volumetric Ultrasound Tomography of Breast

3D quantitative transmission volumetric ultrasound tomography of the breast will be reported with a new code.

This code encompasses both the transmission volumetric ultrasound and the augmentative algorithm analysis which performs quantitative analysis of volumetric breast imaging data by computing both fibroglandular tissue volume (FGV) and the ratio of fibroglandular volume to the total breast volume (FGV/TBV), which provide clinicians with clinically meaningful output quantifying breast tissue composition and providing a measure of breast density that can guide further diagnostic decision-making.

## Quantitative Magnetic Resonance (MR) Analysis of Hepatic Steatosis

A new code has been created to report the assessment of liver steatosis. This nonimaging-based technology generates and processes MR signals to produce an instantaneous report listing the measured values used by the physician or other qualified health care professional as part of their evaluation and management of a patient with hepatic steatosis.

Liver steatosis is central to the diagnosis and monitoring of therapeutic response in patients being considered for recently approved drug therapies for metabolic dysfunction-associated steatohepatitis (MASH).

Note, that this new code is distinct from code 0649T, which describes analysis of traditional MR imaging (MRI) images, whereas the new code describes the use of a point-of-care device that measures steatosis without images or a traditional MRI machine.

## Pancreatic Histotripsy

A new code will be available to report histotripsy of pancreatic malignancy.

Histotripsy is a noninvasive mechanical process of focused ultrasound that uses a nonthermal, nonionizing mechanism of action by delivering high-amplitude, short (microsecond-length), focused ultrasound pulses to destroy tissue at the subcellular level.



## Digital 3D Modeling

Digital 3D model–creation from surface mesh files will be reported with six new time-based codes.

Surface mesh files, which are derived from Digital Imaging and Communications in Medicine (DICOM®) images in a data set, can be manipulated and enhanced to create clinically relevant, patient-specific digital 3D models. These files can be used to create a patient-specific, digital simulation of a planned procedure; design digital intraprocedural templates or guides; and/or provide computational analyses.

## REVISED CODES

The following revised codes and guidelines will be effective on January 1, 2027.

### Carpometacarpal Aspiration or Injection

Codes 20605 and 20606 will be editorially revised to include carpometacarpal and tarsometatarsal joints.

### Spine Deformity

The exclusionary parentheticals for codes 22804, 22812, 22819, 22837, 22847, and 0657T will be editorially revised to include “for the same spinal region” and “when performed in the same spinal region”. The Spine Deformity (eg, Scoliosis, Kyphosis) subsection guidelines will also be revised to reflect these changes.

### Sacroiliac (SI) Joint Arthrodesis

Codes 27278, 27279, and the Arthrodesis subsection guidelines will be revised to further clarify the reporting of SI joint fusions.



## Transcatheter Intracardiac Shunt (TIS) Optimization

Codes 33745 and 33746 will be editorially revised to report TIS creation to include “enlargement of an existing shunt” in the code descriptors and “pulmonary vein” in the example parenthetical listing of the descriptors for target zone angioplasty. The Shunting Procedures subsection guidelines will also be revised to reflect these revisions.

## Lumbar Paravertebral Block/Paraspinous Block

A parenthetical note following code 64462 will be deleted that restricts reporting more than one time per day.

## DELETED CODES

The following deletions will be effective January 1, 2027:

- 55706** Biopsies, prostate, needle, transperineal, stereotactic template guided saturation sampling, including imaging guidance
- 55713** Biopsy, prostate, in-bore CT- or MRI-guided (ie, sextant), with biopsy of additional targeted lesion(s), first targeted lesion
- 0913T** Percutaneous transcatheter therapeutic drug delivery by intracoronary drug-delivery balloon (eg, drug-coated, drug-eluting), including mechanical dilation by nondrug delivery balloon angioplasty, endoluminal imaging using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) when performed, imaging supervision, interpretation, and report, single major coronary artery or branch
- + 0914T** Percutaneous transcatheter therapeutic drug delivery by intracoronary drug-delivery balloon (eg, drug-coated, drug-eluting) performed on a separate target lesion from the target lesion treated with balloon angioplasty, coronary stent placement or coronary atherectomy, including mechanical dilation by nondrug-delivery balloon angioplasty, endoluminal imaging using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) when performed, imaging supervision, interpretation, and report, single major coronary artery or branch (List separately in



addition to code for percutaneous coronary stent or atherectomy intervention)

## RETAINED CODES

The following Category III codes that were scheduled to sunset in 2027 will be extended for another 5 years until December 2032:

- 0440T** Ablation, percutaneous, cryoablation, includes imaging guidance; upper extremity distal/peripheral nerve
- 0441T** Ablation, percutaneous, cryoablation, includes imaging guidance; lower extremity distal/peripheral nerve
- 0442T** Ablation, percutaneous, cryoablation, includes imaging guidance; nerve plexus or other truncal nerve (eg, brachial plexus, pudendal nerve)
- 0648T** Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; single organ
- + 0649T** Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); single organ (List separately in addition to code for primary procedure)
- 0689T** Quantitative ultrasound tissue characterization (non-elastographic), including interpretation and report, obtained without diagnostic ultrasound examination of the same anatomy (eg, organ, gland, tissue, target structure)
- + 0690T** Quantitative ultrasound tissue characterization (non-elastographic), including interpretation and report, obtained with diagnostic ultrasound examination of the same anatomy (eg, organ, gland, tissue, target structure) (List separately in addition to code for primary procedure)



- 0691T** Automated analysis of an existing computed tomography study for vertebral fracture(s), including assessment of bone density when performed, data preparation, interpretation, and report
- 0697T** Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; multiple organs
- + 0698T** Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); multiple organs (List separately in addition to code for primary procedure)