

2024 Neurosurgery: Is the Surgery Medicare Inpatient Only or not?

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xxxxx	Yellow = New CPT/HCPCS Code for CY 2024	xxxxx	Green = Active CPT/HCPCS changed from "IP only" to "not IP only" on 1/1/2023 and under status denial exemption until 1/1/2025
xxxxx	Blue = Active CPT/HCPCS changed from "not IP only" to "IP only" as of 1/1/2024	xxxxx	Orange = Active CPT/HCPCS changed from "IP only" to "not IP only" on 1/1/2024 and under status denial exemption until 1/1/2026

Note: For Spine Procedures, Refer to Spine Surgery List

CSF: Aspiration, Diversion, or Shunt Procedures

Inpatient Only Procedure		Not an Inpatient Only Procedure	
		61000	Subdural tap through fontanelle, or suture, infant, unilateral or bilateral; initial
		61001	Subdural tap through fontanelle, or suture, infant, unilateral or bilateral; subsequent taps
		61020	Ventricular puncture through previous burr hole, fontanelle, suture, or implanted ventricular catheter/reservoir; without injection
		61026	Ventricular puncture through previous burr hole, fontanelle, suture, or implanted ventricular catheter/reservoir; with injection of medication or other substance for diagnosis or treatment
		61050	Cisternal or lateral cervical (C1-C2) puncture; without injection (separate procedure)
		61055	Cisternal or lateral cervical (C1-C2) puncture; with injection of medication or other substance for diagnosis or treatment (eg, C1-C2)
62180	Ventriculocisternostomy (Torkildsen type operation)	61070	Puncture of shunt tubing or reservoir for aspiration or injection procedure
62190	Creation of shunt; subarachnoid/subdural-atrial, -jugular, -auricular		
62192	Creation of shunt; subarachnoid/subdural-peritoneal, -pleural, other terminus	62194	Replacement or irrigation, subarachnoid/subdural catheter
62200	Ventriculocisternostomy, third ventricle;		
62201	Ventriculocisternostomy, third ventricle; stereotactic, neuroendoscopic method		
62220	Creation of shunt; ventriculo-atrial, -jugular, -auricular		
62223	Creation of shunt; ventriculo-peritoneal, -pleural, other terminus	62225	Replacement or irrigation, ventricular catheter
62256	Removal of complete cerebrospinal fluid shunt system; without replacement	62230	Replacement or revision of cerebrospinal fluid shunt, obstructed valve, or distal catheter in shunt system
62258	Removal of complete cerebrospinal fluid shunt system; with replacement by similar or other shunt at same operation	62252	Reprogramming of programmable cerebrospinal shunt

Electrode Procedures

Inpatient Only Procedure		Not an Inpatient Only Procedure	
		0587T	Percutaneous implantation or replacement of integrated single device neurostimulation system including electrode array and receiver or pulse generator, including analysis, programming, and imaging guidance when performed, posterior tibial nerve
		0588T	Revision or removal of integrated single device neurostimulation system including electrode array and receiver or pulse generator, including analysis, programming, and imaging guidance when performed,

			posterior tibial nerve
		0784T	Insertion or replacement of percutaneous electrode array, spinal, with integrated neurostimulator, including imaging guidance, when performed
		0785T	Revision or removal of neurostimulator electrode array, spinal, with integrated neurostimulator
61210	Burr hole(s); for implanting ventricular catheter, reservoir, EEG electrode(s), pressure recording device, or other cerebral monitoring device (separate procedure)	0786T	Insertion or replacement of percutaneous electrode array, sacral, with integrated neurostimulator, including imaging guidance, when performed
61531	Subdural implantation of strip electrodes through 1 or more burr or trephine hole(s) for long-term seizure monitoring	0787T	Revision or removal of neurostimulator electrode array, sacral, with integrated neurostimulator
61533	Craniotomy with elevation of bone flap; for subdural implantation of an electrode array, for long-term seizure monitoring		
61535	Craniotomy with elevation of bone flap; for removal of epidural or subdural electrode array, without excision of cerebral tissue (separate procedure)		
61760	Stereotactic implantation of depth electrodes into the cerebrum for long-term seizure monitoring		
61850	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cortical		
61860	Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral, cortical		
61863	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; first array		
61864	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)	61880	Revision or removal of intracranial neurostimulator electrodes
61867	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; first array	61885	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to a single electrode array
61868	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)	61886	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to 2 or more electrode arrays
		61888	Revision or removal of cranial neurostimulator pulse generator or receiver
61889	Insertion of skull-mounted cranial neurostimulator pulse generator or receiver, including craniectomy or craniotomy, when performed, with direct or inductive coupling, with connection to depth and/or cortical strip electrode array(s)	61891	Revision or replacement of skull-mounted cranial neurostimulator pulse generator or receiver with connection to depth and/or cortical strip electrode array(s)
		61892	Removal of skull-mounted cranial neurostimulator pulse generator or receiver with cranioplasty, when performed
		63650	Percutaneous implantation of neurostimulator electrode array, epidural
		63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural
			Removal (63661) or Revision (63663) of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed
			Removal (63662) or Revision (63664) of spinal neurostimulator electrode plate/paddle(s) placed via laminotomy or laminectomy, including fluoroscopy, when performed
		63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, direct or inductive coupling

		63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver
		64553	Percutaneous implantation of neurostimulator electrode array; cranial nerve
		64555	Percutaneous implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)
		64561	Percutaneous implantation of neurostimulator electrode array; sacral nerve (transforaminal placement) including image guidance, if performed
		64566	Posterior tibial neurostimulation, percutaneous needle electrode, single treatment, includes programming
		64568	Incision for implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator
		64569	Revision or replacement of cranial nerve (eg, vagus nerve) neurostimulator electrode array, including connection to existing pulse generator
		64570	Removal of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator
		64575	Incision for implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)
		64580	Incision for implantation of neurostimulator electrode array; neuromuscular
		64581	Incision for implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)
		64585	Revision or removal of peripheral neurostimulator electrode array
		64596	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; initial electrode array
		64597	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; each additional electrode array (List separately in addition to code for primary procedure)
		64598	Revision or removal of neurostimulator electrode array, peripheral nerve, with integrated neurostimulator

Skull Defect Repair Procedures

Inpatient Only Procedure		Not an Inpatient Only Procedure	
61550	Craniectomy for craniostyosis; single cranial suture		
61552	Craniectomy for craniostyosis; multiple cranial sutures		
61556	Craniotomy for craniostyosis; frontal or parietal bone flap		
61557	Craniotomy for craniostyosis; bifrontal bone flap		
61558	Extensive craniectomy for multiple cranial suture craniostyosis (eg, cloverleaf skull); not requiring bone grafts		
61559	Extensive craniectomy for multiple cranial suture craniostyosis (eg, cloverleaf skull); recontouring with multiple osteotomies and bone autografts (eg, barrel-stave procedure) (includes obtaining grafts)		
62005	Elevation of depressed skull fracture; compound or comminuted, extradural	62000	Elevation of depressed skull fracture; simple, extradural
62010	Elevation of depressed skull fracture; with repair of dura and/or debridement of brain		
62100	Craniotomy for repair of dural/cerebrospinal fluid leak, including surgery for rhinorrhea/otorrhea		
62115	Reduction of craniomegalic skull (eg, treated hydrocephalus); not requiring bone grafts or cranioplasty		
62117	Reduction of craniomegalic skull (eg, treated hydrocephalus); requiring craniotomy and reconstruction with or without bone graft (includes obtaining grafts)		
62120	Repair of encephalocele, skull vault, including		

	cranioplasty		
62121	Craniotomy for repair of encephalocele, skull base		
62140	Cranioplasty for skull defect; up to 5 cm diameter		
62141	Cranioplasty for skull defect; larger than 5 cm diameter		
62142	Removal of bone flap or prosthetic plate of skull		
62143	Replacement of bone flap or prosthetic plate of skull		
62145	Cranioplasty for skull defect with reparative brain surgery		
62146	Cranioplasty with autograft (includes obtaining bone grafts); up to 5 cm diameter		
62147	Cranioplasty with autograft (includes obtaining bone grafts); larger than 5 cm diameter		
62148	Incision and retrieval of subcutaneous cranial bone graft for cranioplasty (List separately in addition to code for primary procedure)		

Stereotactic Brain Procedures

Inpatient Only Procedure		Not an Inpatient Only Procedure	
61618	Secondary repair of dura for cerebrospinal fluid leak, anterior, middle or posterior cranial fossa following surgery of the skull base; by free tissue graft (eg, pericranium, fascia, tensor fascia lata, adipose tissue, homologous or synthetic grafts)	0398T	Magnetic resonance image guided high intensity focused ultrasound (MRgFUS), stereotactic ablation lesion, intracranial for movement disorder including stereotactic navigation and frame placement when performed
61619	Secondary repair of dura for cerebrospinal fluid leak, anterior, middle or posterior cranial fossa following surgery of the skull base; by local or regionalized vascularized pedicle flap or myocutaneous flap (including galea, temporalis, frontalis or occipitalis muscle)		
61735	Creation of lesion by stereotactic method, including burr hole(s) and localizing and recording techniques, single or multiple stages; subcortical structure(s) other than globus pallidus or thalamus	61720	Creation of lesion by stereotactic method, including burr hole(s) and localizing and recording techniques, single or multiple stages; globus pallidus or thalamus
61750	Stereotactic biopsy, aspiration, or excision, including burr hole(s), for intracranial lesion;		
61751	Stereotactic biopsy, aspiration, or excision, including burr hole(s), for intracranial lesion; with computed tomography and/or magnetic resonance guidance		
61760	Stereotactic implantation of depth electrodes into the cerebrum for long-term seizure monitoring	61770	Stereotactic localization, including burr hole(s), with insertion of catheter(s) or probe(s) for placement of radiation source
		61790	Creation of lesion by stereotactic method, percutaneous, by neurolytic agent (eg, alcohol, thermal, electrical, radiofrequency); gasserian ganglion
		61791	Creation of lesion by stereotactic method, percutaneous, by neurolytic agent (eg, alcohol, thermal, electrical, radiofrequency); trigeminal medullary tract
		61796	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion
		61797	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, simple (List separately in addition to code for primary procedure)
		61798	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion
		61799	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, complex (List separately in addition to code for primary procedure)
		61800	Application of stereotactic headframe for stereotactic radiosurgery (List separately in addition to code for primary procedure)
61863	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; first array		

61864	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)		
61867	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; first array	63620	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion
61868	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)	63621	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional spinal lesion (List separately in addition to code for primary procedure)
		77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based
		77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based
		77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions

Vascular Procedures

Inpatient Only Procedure		Not an Inpatient Only Procedure	
61600	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; extradural	33370	Transcatheter placement and subsequent removal of cerebral embolic protection device(s), including arterial access, catheterization, imaging, and radiological supervision and interpretation, percutaneous
61601	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; intradural, including dural repair, with or without graft		
61605	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; extradural		
61606	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; intradural, including dural repair, with or without graft		
61607	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; extradural		
61608	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; intradural, including dural repair, with or without graft		
61611	Transection or ligation, carotid artery in petrous canal; without repair (List separately in addition to code for primary procedure)		
61613	Obliteration of carotid aneurysm, arteriovenous malformation, or carotid-cavernous fistula by dissection within cavernous sinus		
61615	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; extradural		
61616	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; intradural, including dural repair, with or without graft	61623	Endovascular temporary balloon arterial occlusion, head or neck (extracranial/intracranial) including selective catheterization of vessel to be occluded, positioning and inflation of occlusion balloon, concomitant neurological monitoring, and radiologic

			supervision and interpretation of all angiography required for balloon occlusion and to exclude vascular injury post occlusion
61624	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; central nervous system (intracranial, spinal cord)	61626	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; non-central nervous system, head or neck (extracranial, brachiocephalic branch)
61630	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous		
61635	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angioplasty, if performed		
61645	Percutaneous arterial transluminal mechanical thrombectomy and/or infusion for thrombolysis, intracranial, any method, including diagnostic angiography, fluoroscopic guidance, catheter placement, and intraprocedural pharmacological thrombolytic injection(s)		
61650	Endovascular intracranial prolonged administration of pharmacologic agent(s) other than for thrombolysis, arterial, including catheter placement, diagnostic angiography, and imaging guidance; initial vascular territory		
61651	Endovascular intracranial prolonged administration of pharmacologic agent(s) other than for thrombolysis, arterial, including catheter placement, diagnostic angiography, and imaging guidance; each additional vascular territory (List separately in addition to code for primary procedure)		
61680	Surgery of intracranial arteriovenous malformation; supratentorial, simple		
61682	Surgery of intracranial arteriovenous malformation; supratentorial, complex		
61684	Surgery of intracranial arteriovenous malformation; infratentorial, simple		
61686	Surgery of intracranial arteriovenous malformation; infratentorial, complex		
61690	Surgery of intracranial arteriovenous malformation; dural, simple		
61692	Surgery of intracranial arteriovenous malformation; dural, complex		
61697	Surgery of complex intracranial aneurysm, intracranial approach; carotid circulation		
61698	Surgery of complex intracranial aneurysm, intracranial approach; vertebrobasilar circulation		
61700	Surgery of simple intracranial aneurysm, intracranial approach; carotid circulation		
61702	Surgery of simple intracranial aneurysm, intracranial approach; vertebrobasilar circulation		
61703	Surgery of intracranial aneurysm, cervical approach by application of occluding clamp to cervical carotid artery (Selverstone-Crutchfield type)		
61705	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intracranial and cervical occlusion of carotid artery		
61708	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intracranial electrothrombosis		
61710	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intra-arterial embolization, injection procedure, or balloon catheter		
61711	Anastomosis, arterial, extracranial-intracranial (eg, middle cerebral/cortical) arteries		

Other Neurosurgical Procedures

Inpatient Only Procedure		Not an Inpatient Only Procedure	
20661	Application of halo, including removal; cranial	0735T	Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with primary craniotomy (List separately in addition to code for primary

			procedure)
20664	Application of halo, including removal, cranial, 6 or more pins placed, for thin skull osteology (eg, pediatric patients, hydrocephalus, osteogenesis imperfecta)		
61105	Twist drill hole for subdural or ventricular puncture		
61108	Twist drill hole(s) for subdural, intracerebral, or ventricular puncture; for evacuation and/or drainage of subdural hematoma		
61120	Burr hole(s) for ventricular puncture (including injection of gas, contrast media, dye, or radioactive material)		
61140	Burr hole(s) or trephine; with biopsy of brain or intracranial lesion		
61150	Burr hole(s) or trephine; with drainage of brain abscess or cyst		
61151	Burr hole(s) or trephine; with subsequent tapping (aspiration) of intracranial abscess or cyst		
61154	Burr hole(s) with evacuation and/or drainage of hematoma, extradural or subdural		
61156	Burr hole(s); with aspiration of hematoma or cyst, intracerebral		
61210	Burr hole(s); for implanting ventricular catheter, reservoir, EEG electrode(s), pressure recording device, or other cerebral monitoring device (separate procedure)	61215	Insertion of subcutaneous reservoir, pump or continuous infusion system for connection to ventricular catheter
61250	Burr hole(s) or trephine, supratentorial, exploratory, not followed by other surgery		
61253	Burr hole(s) or trephine, infratentorial, unilateral or bilateral		
61304	Craniectomy or craniotomy, exploratory; supratentorial		
61305	Craniectomy or craniotomy, exploratory; infratentorial (posterior fossa)		
61312	Craniectomy or craniotomy for evacuation of hematoma, supratentorial; extradural or subdural		
61313	Craniectomy or craniotomy for evacuation of hematoma, supratentorial; intracerebral		
61314	Craniectomy or craniotomy for evacuation of hematoma, infratentorial; extradural or subdural		
61315	Craniectomy or craniotomy for evacuation of hematoma, infratentorial; intracerebellar		
61316	Incision and subcutaneous placement of cranial bone graft (List separately in addition to code for primary procedure)		
61320	Craniectomy or craniotomy, drainage of intracranial abscess; supratentorial		
61321	Craniectomy or craniotomy, drainage of intracranial abscess; infratentorial		
61322	Craniectomy or craniotomy, decompressive, with or without duraplasty, for treatment of intracranial hypertension, without evacuation of associated intraparenchymal hematoma; without lobectomy		
61323	Craniectomy or craniotomy, decompressive, with or without duraplasty, for treatment of intracranial hypertension, without evacuation of associated intraparenchymal hematoma; with lobectomy	61330	Decompression of orbit only, transcranial approach
61333	Exploration of orbit (transcranial approach); with removal of lesion		
61340	Subtemporal cranial decompression (pseudotumor cerebri, slit ventricle syndrome)		
61343	Craniectomy, suboccipital with cervical laminectomy for decompression of medulla and spinal cord, with or without dural graft (eg, Arnold-Chiari malformation)		
61345	Other cranial decompression, posterior fossa		
61450	Craniectomy, subtemporal, for section, compression, or decompression of sensory root of gasserian ganglion		
61458	Craniectomy, suboccipital; for exploration or decompression of cranial nerves		
61460	Craniectomy, suboccipital; for section of 1 or more cranial nerves		
61500	Craniectomy; with excision of tumor or other bone lesion of skull		

61501	Craniectomy; for osteomyelitis		
61510	Craniectomy, trephination, bone flap craniotomy; for excision of brain tumor, supratentorial, except meningioma		
61512	Craniectomy, trephination, bone flap craniotomy; for excision of meningioma, supratentorial		
61514	Craniectomy, trephination, bone flap craniotomy; for excision of brain abscess, supratentorial		
61516	Craniectomy, trephination, bone flap craniotomy; for excision or fenestration of cyst, supratentorial		
61517	Implantation of brain intracavitary chemotherapy agent (List separately in addition to code for primary procedure)		
61518	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; except meningioma, cerebellopontine angle tumor, or midline tumor at base of skull		
61519	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; meningioma		
61520	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; cerebellopontine angle tumor		
61521	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; midline tumor at base of skull		
61522	Craniectomy, infratentorial or posterior fossa; for excision of brain abscess		
61524	Craniectomy, infratentorial or posterior fossa; for excision or fenestration of cyst		
61526	Craniectomy, bone flap craniotomy, transtemporal (mastoid) for excision of cerebellopontine angle tumor;		
61530	Craniectomy, bone flap craniotomy, transtemporal (mastoid) for excision of cerebellopontine angle tumor; combined with middle/posterior fossa craniotomy/craniectomy		
61531	Subdural implantation of strip electrodes through 1 or more burr or trephine hole(s) for long-term seizure monitoring		
61533	Craniotomy with elevation of bone flap; for subdural implantation of an electrode array, for long-term seizure monitoring		
61534	Craniotomy with elevation of bone flap; for excision of epileptogenic focus without electrocorticography during surgery		
61535	Craniotomy with elevation of bone flap; for removal of epidural or subdural electrode array, without excision of cerebral tissue (separate procedure)		
61536	Craniotomy with elevation of bone flap; for excision of cerebral epileptogenic focus, with electrocorticography during surgery (includes removal of electrode array)		
61537	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, without electrocorticography during surgery		
61538	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, with electrocorticography during surgery		
61539	Craniotomy with elevation of bone flap; for lobectomy, other than temporal lobe, partial or total, with electrocorticography during surgery		
61540	Craniotomy with elevation of bone flap; for lobectomy, other than temporal lobe, partial or total, without electrocorticography during surgery		
61541	Craniotomy with elevation of bone flap; for transection of corpus callosum		
61543	Craniotomy with elevation of bone flap; for partial or subtotal (functional) hemispherectomy		
61544	Craniotomy with elevation of bone flap; for excision or coagulation of choroid plexus		
61545	Craniotomy with elevation of bone flap; for excision of craniopharyngioma		
61546	Craniotomy for hypophysectomy or excision of pituitary tumor, intracranial approach		
61548	Hypophysectomy or excision of pituitary tumor, transnasal or transseptal approach, nonstereotactic		

61563	Excision, intra and extracranial, benign tumor of cranial bone (eg, fibrous dysplasia); without optic nerve decompression		
61564	Excision, intra and extracranial, benign tumor of cranial bone (eg, fibrous dysplasia); with optic nerve decompression		
61566	Craniotomy with elevation of bone flap; for selective amygdalohippocampectomy		
61567	Craniotomy with elevation of bone flap; for multiple subpial transections, with electrocorticography during surgery		
61570	Craniectomy or craniotomy; with excision of foreign body from brain		
61571	Craniectomy or craniotomy; with treatment of penetrating wound of brain		
61575	Transoral approach to skull base, brain stem or upper spinal cord for biopsy, decompression or excision of lesion;		
61576	Transoral approach to skull base, brain stem or upper spinal cord for biopsy, decompression or excision of lesion; requiring splitting of tongue and/or mandible (including tracheostomy)		
61580	Craniofacial approach to anterior cranial fossa; extradural, including lateral rhinotomy, ethmoidectomy, sphenoidectomy, without maxillectomy or orbital exenteration		
61581	Craniofacial approach to anterior cranial fossa; extradural, including lateral rhinotomy, orbital exenteration, ethmoidectomy, sphenoidectomy and/or maxillectomy		
61582	Craniofacial approach to anterior cranial fossa; extradural, including unilateral or bifrontal craniotomy, elevation of frontal lobe(s), osteotomy of base of anterior cranial fossa		
61583	Craniofacial approach to anterior cranial fossa; intradural, including unilateral or bifrontal craniotomy, elevation or resection of frontal lobe, osteotomy of base of anterior cranial fossa		
61584	Orbitocranial approach to anterior cranial fossa, extradural, including supraorbital ridge osteotomy and elevation of frontal and/or temporal lobe(s); without orbital exenteration		
61585	Orbitocranial approach to anterior cranial fossa, extradural, including supraorbital ridge osteotomy and elevation of frontal and/or temporal lobe(s); with orbital exenteration		
61586	Bicoronal, transzygomatic and/or LeFort I osteotomy approach to anterior cranial fossa with or without internal fixation, without bone graft		
61590	Infratemporal pre-auricular approach to middle cranial fossa (parapharyngeal space, infratemporal and midline skull base, nasopharynx), with or without disarticulation of the mandible, including parotidectomy, craniotomy, decompression and/or mobilization of the facial nerve and/or petrous carotid artery		
61591	Infratemporal post-auricular approach to middle cranial fossa (internal auditory meatus, petrous apex, tentorium, cavernous sinus, parasellar area, infratemporal fossa) including mastoidectomy, resection of sigmoid sinus, with or without decompression and/or mobilization of contents of auditory canal or petrous carotid artery		
61592	Orbitocranial zygomatic approach to middle cranial fossa (cavernous sinus and carotid artery, clivus, basilar artery or petrous apex) including osteotomy of zygoma, craniotomy, extra- or intradural elevation of temporal lobe		
61595	Transtemporal approach to posterior cranial fossa, jugular foramen or midline skull base, including mastoidectomy, decompression of sigmoid sinus and/or facial nerve, with or without mobilization		
61596	Transcochlear approach to posterior cranial fossa, jugular foramen or midline skull base, including labyrinthectomy, decompression, with or without		

	mobilization of facial nerve and/or petrous carotid artery		
61597	Transcondylar (far lateral) approach to posterior cranial fossa, jugular foramen or midline skull base, including occipital condylectomy, mastoidectomy, resection of C1-C3 vertebral body(s), decompression of vertebral artery, with or without mobilization		
61598	Transpetrosal approach to posterior cranial fossa, clivus or foramen magnum, including ligation of superior petrosal sinus and/or sigmoid sinus		
61600	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; extradural		
61601	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; intradural, including dural repair, with or without graft		
61605	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; extradural		
61606	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; intradural, including dural repair, with or without graft		
61607	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; extradural		
61608	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; intradural, including dural repair, with or without graft		
61615	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; extradural		
61616	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; intradural, including dural repair, with or without graft		
61736	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; single trajectory for 1 simple lesion		
61737	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed, multiple trajectories for multiple or complex lesion(s)		
62161	Neuroendoscopy, intracranial; with dissection of adhesions, fenestration of septum pellucidum or intraventricular cysts (including placement, replacement, or removal of ventricular catheter)		
62162	Neuroendoscopy, intracranial; with fenestration or excision of colloid cyst, including placement of external ventricular catheter for drainage		
62164	Neuroendoscopy, intracranial; with excision of brain tumor, including placement of external ventricular catheter for drainage		
62165	Neuroendoscopy, intracranial; with excision of pituitary tumor, transnasal or trans-sphenoidal approach		Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; codes: 62263, 62264