



American Society of Interventional Pain Physicians

" The Voice of Interventional Pain Management "

81 Lakeview Drive, Paducah, KY 42001

Tel.: (270) 554-9412; Fax : (270) 554-8987

E-mail:asipp@asipp.org

2024 Final - Physician Payment Rates rates compared to 2023

The ACA sequester reductions of 2% are not applied for the years 2023 and 2024.

CPT	Description	2023 FINAL (CF=\$33.8872)		2024 Final with 3.39% Cut (CF=\$32.7375)			
		Non-Facility (Office)	Facility ASC/Hospital)	Non-Facility (Office)	Facility (ASC/Hospital)	% of change Non-Facility	Facility
20526	Injection, therapeutic (eg, local anesthetic; corticosteroid), carpal tunnel	\$83.36	\$57.61	\$81.2	\$55.7	-2.6%	-3.4%
20550	tendon sheath, ligament injection	\$58.62	\$39.31	\$57.0	\$38.0	-2.8%	-3.4%
20551	Tendon origin/insertion	\$58.62	\$39.31	\$56.6	\$37.6	-3.4%	-4.2%
20552	Single or multiple trigger point(s), one or two muscle group(s)	\$53.54	\$37.28	\$51.7	\$36.0	-3.4%	-3.4%
20553	Single or multiple trigger point(s), three or more muscle groups	\$62.01	\$42.70	\$59.6	\$40.9	-3.9%	-4.1%
20600	Small joint injection	\$53.54	\$35.58	\$53.0	\$35.0	-0.9%	-1.5%
20605	Intermediate joint injection	\$55.91	\$37.28	\$54.3	\$36.0	-2.8%	-3.4%
20610	Major joint injection	\$65.40	\$45.41	\$64.2	\$44.5	-1.9%	-1.9%
22510	Vertebroplasty (Thoracic)	\$1,860.41	\$434.43	\$1,748.5	\$420.0	-6.0%	-3.2%
22511	Vertebroplasty (Lumbar)	\$1,850.92	\$407.32	\$1,746.5	\$395.5	-5.6%	-3.0%
22512	Vertebroplasty - Additional	\$747.55	\$207.05	\$709.1	\$200.7	-5.1%	-2.9%
22513	Percut kyphoplasty, thor	\$5,888.92	\$513.39	\$5,510.0	\$497.9	-6.4%	-3.0%
22514	Percut kyphoplasty, thor	\$5,861.13	\$479.17	\$5,485.8	\$464.2	-6.4%	-3.1%
22515	Percut kyphoplasty, Additional	\$3,025.11	\$218.91	\$2,822.0	\$211.2	-6.7%	-3.4%
22534	Percut kyphoplasty, lumbar		\$362.93		\$352.6		-2.8%
22612	Fusion, Posterior, Posterolateral or Lateral		\$1,610.32		\$1,564.5		-2.9%
22840	Posterior non-segmental instrumentation		\$763.82		\$739.9		-3.1%
22869	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, lumbar, single level with Fluoro		\$435.45		\$425.9		-2.2%
22870	Insertion of interlaminar/interspinous process stabilization w/o decompression or fusion add-on		\$118.27		\$114.3		-3.4%
27093	Injection procedure for HIP arthrography – without anesthesia	\$239.58	\$68.79	\$225.9	\$65.8	-5.7%	-4.3%

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27095	Injection procedure for HIP arthrography – with anesthesia	\$319.90	\$82.35	\$299.9	\$79.6	-6.3%	-3.4%
27096	(G0260) Injection procedure for Sacroiliac joint, arthrography	\$165.03	\$83.02	\$161.4	\$80.9	-2.2%	-2.6%
27279	Sacroiliac Joint Arthrodesis, Percutaneous		\$826.85		\$790.9		-4.4%
27280	Sacroiliac joint Fusion		\$1,385.31		\$1,346.8		-2.8%
61070	PUMP study		\$56.93		\$55.0		-3.4%
61885	Insertion or replacement of cranial neurostimulator generator or receiver - A Single Electrode Array		\$541.86		\$530.3		-2.0%
62263	Percutaneous epidural adhesiolysis - 2 or 3 days	\$647.58	\$318.88	\$635.8	\$318.2	-1.8%	-0.2%
62264	Percutaneous epidural adhesiolysis – 1 day	\$446.63	\$244.67	\$431.2	\$238.7	-3.5%	-2.4%
62268	Percutaneous aspiration, spinal cord cyst or syrinx		\$256.19		\$326.1		-3.6%
62269	Biopsy of spinal cord, percutaneous needle		\$260.25		\$250.4		-3.7%
62270	Spinal puncture, diagnostic	\$134.87	\$63.03	\$143.7	\$62.2	6.6%	-1.3%
62272	Spinal puncture, therapeutic	\$181.30	\$91.50	\$182.0	\$90.0	0.4%	-1.9%
62273	Epidural, blood patch	\$170.79	\$113.18	\$165.0	\$110.3	-3.4%	-2.5%
62280	Subarachnoid neurolytic injection	\$331.76	\$159.27	\$322.8	\$156.5	-2.7%	-1.7%
62281	Neurolytic epidural, C/T	\$243.99	\$159.61	\$236.0	\$151.9	-3.3%	-4.6%
62282	Neurolytic epidural, L/S	\$318.88	\$141.99	\$305.4	\$138.8	-4.2%	-2.2%
62284	Injection procedure myelography	\$194.17	\$84.38	\$183.3	\$80.5	-5.6%	-4.5%
62287	Disc decompression		\$568.97		\$592.2		-1.7%
62290	Diskogrsphy each level: lumbar	\$356.15	\$157.58	\$336.5	\$151.6	-5.5%	-4.2%
62291	Diskogrsphy each level: C/T	\$327.69	\$146.05	\$302.8	\$138.2	-7.6%	-5.4%

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		Non-Facility (Office)	Facility ASC/Hospital)	Non-Facility (Office)	Facility (ASC/Hospital)	% of change Non-Facility Facility
62292	Chemoneurolysis		\$580.49		\$571.6	-1.4%
62320	Cervical or Thoracic interlaminar epidural; without fluoro	\$167.74	\$100.98	\$161.1	\$97.6	-4.0% -3.4%
62321	C/T interlaminar epidural; with fluoro	\$266.01	\$106.74	\$258.3	\$104.8	-2.9% -1.8%
62322	Lumbar or sacral (caudal) interlaminar epidural injection(s); without fluoro	\$140.29	\$80.65	\$132.9	\$77.3	-5.3% -4.2%
62323	Lumbar or sacral (caudal) interlaminar epidural injection(s); with fluoro	\$262.29	\$98.95	\$254.0	\$96.9	-3.1% -2.0%
62324	Cervical or thoracic continuous interlaminar epidural Injection(s);, without fluoro	\$139.95	\$89.46	\$134.6	\$86.4	-3.9% -3.4%
62325	Cervical or thoracic continuous interlaminar epidural Injection(s);, with fluoro	\$257.54	\$111.15	\$245.5	\$107.4	-4.7% -3.4%
62326	Lumbar or sacral (caudal) continuous interlaminar epidural Injection(s);, Without fluoro	\$140.97	\$86.07	\$134.9	\$82.8	-4.3% -3.7%
62327	Lumbar or sacral (caudal) continuous interlaminar epidural Injection(s);, With fluoro	\$272.79	\$105.73	\$268.1	\$104.8	-1.7% -0.9%
62350	Implantation or replacement of intrathecal pump		\$403.26		\$394.2	-2.2%
62355	Removal or previously implanted intrathecal or epidural catheter		\$279.91		\$274.3	-1.7%
62360	Implant or replacement of device for intrathecal or epidural drug infusion; subcutaneous reservoir		\$323.96		\$308.1	-3.5%
62361	Implantation or replacement of device for epidural drug infusion; non-programmable pump		\$446.29		\$437.4	-2.0%
62362	Implant spine infusion pump		\$391.40		\$382.4	-2.4%
62365	Remove spine infusion device		\$301.60		\$296.6	-1.7%
62367	Electronic analysis of programmable pump	\$32.19	\$24.74	\$31.4	\$24.2	-2.4% -2.0%
62368	Electronic analysis of programmable pump with reprogramming	\$44.39	\$34.56	\$43.5	\$33.4	-1.9% -3.4%
62369	Anal sp inf pmp w/reprg&fill	\$93.19	\$34.90	\$90.7	\$34.0	-2.7% -2.4%
62370	Anl sp inf pmp w/mdreprg&fil	\$93.87	\$46.09	\$90.7	\$44.5	-3.4% -3.4%
63650	Implantation of Neurostimulator - Percutaneous	\$2,341.27	\$415.80	\$2,236.0	\$406.6	-4.5% -2.1%

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		Non-Facility (Office)	Facility ASC/Hospital)	Non-Facility (Office)	Facility (ASC/Hospital)	% of change Non-Facility	% of change Facility
63655	Implantation of Neurostimulator - Laminectomy		\$858.02		\$838.1	-2.3%	
63661	Removal of Spinal Neurostimulator Electrode - Percutaneous	\$695.70	\$332.09	\$675.0	\$325.7	-3.0%	-1.9%
63662	Removal of Spinal Neurostimulator Electrode - Laminotomy		\$868.19		\$850.8	-2.0%	
63663	Revision Including Replacement of Spinal Neurostimulator Electrode - Percutaneous	\$916.31	\$454.43	\$888.8	\$443.9	-3.0%	-2.4%
63664	Revision Including Replacement of Spinal Neurostimulator Electrode - Laminectomy		\$905.80		\$885.5	-2.3%	
63685	Insertion or Replacement of Spinal Neurostimulator Pulse Generator or Receiver		\$367.34		\$336.5	-8.4%	
63688	Revision or Removal of Implanted Spinal Neurostimulator Pulse Generator or Receiver		\$379.88		\$297.6	-21.7%	
64400	Injection, anesthetic agent; Trigeminal nerve, any division or branch	\$113.86	\$50.83	\$112.0	\$50.7	-1.7%	-0.1%
64405	Greater occipital nerve	\$75.91	\$53.20	\$74.3	\$51.7	-2.1%	-2.7%
64408	Vagus nerve	\$83.36	\$45.41	\$80.2	\$43.9	-3.8%	-3.4%
64415	Brachial plexus	\$136.57	\$69.47	\$131.6	\$67.4	-3.6%	-2.9%
64417	Axillary nerve	\$162.32	\$63.37	\$157.5	\$62.2	-3.0%	-1.8%
64418	Suprascapular nerve	\$88.11	\$55.91	\$84.8	\$54.0	-3.8%	-3.4%
64420	Intercostal, Single Level	\$98.61	\$58.62	\$96.2	\$56.6	-2.4%	-2.8%
64421	Intercostal, Multiple levels	\$33.21	\$24.40	\$32.7	\$24.2	-1.4%	-0.7%
64425	Ilioinguinal, Iliohypogastric	\$112.17	\$54.90	\$108.7	\$53.0	-3.1%	-2.8%
64430	Pudendal nerve	\$99.97	\$54.90	\$96.6	\$53.4	-3.4%	-2.8%
64445	Sciatic nerve	\$163.34	\$73.54	\$155.8	\$70.1	-4.6%	-4.7%
64447	Femoral Nerve Block	\$117.93	\$63.03	\$113.9	\$61.2	-3.4%	-2.8%
64450	Other peripheral nerve or branch	\$75.91	\$42.02	\$74.0	\$40.9	-2.5%	-2.6%

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		Non-Facility (Office)	Facility ASC/Hospital)	Non-Facility (Office)	Facility (ASC/Hospital)	% of change Non-Facility	% of change Facility
64451	Sacroiliac joint nerves	\$231.11	\$81.67	\$223.9	\$79.6	-3.1%	-2.2%
64454	Genicular nerve branches, with imaging	\$224.33	\$82.01	\$218.0	\$80.2	-2.8%	-2.2%
64479	C/T Transforaminal epidural injections	\$268.73	\$130.47	\$261.2	\$127.3	-2.8%	-2.4%
64480	C/T Transforaminal epidural injections add-on	\$136.23	\$61.34	\$132.3	\$59.3	-2.9%	-3.4%
64483	L/S Transforaminal epidural injections	\$249.41	\$110.81	\$242.3	\$108.7	-2.9%	-1.9%
64484	L/S Transforaminal epidural injections add-on	\$113.18	\$51.51	\$109.3	\$50.1	-3.4%	-2.7%
64490	C/T Paravertebral facet joint or facet joint nerve, 1st Level	\$193.16	\$105.05	\$189.6	\$102.8	-1.9%	-2.1%
64491	C/T Paravertebral facet joint or facet joint nerve; 2nd Level	\$97.93	\$59.30	\$95.6	\$57.6	-2.4%	-2.8%
64492	C/T Paravertebral facet joint or facet joint nerve; 3rd Level	\$98.61	\$60.32	\$95.9	\$58.6	-2.7%	-2.8%
64493	L/S Paravertebral facet joint or facet joint nerve; 1st Level	\$178.59	\$90.48	\$174.5	\$88.4	-2.3%	-2.3%
64494	L/S Paravertebral facet joint or facet joint nerve; 2nd Level	\$91.50	\$51.17	\$89.4	\$49.4	-2.3%	-3.4%
64495	L/S Paravertebral facet joint or facet joint nerve; 3rd Level	\$91.50	\$51.85	\$89.4	\$50.4	-2.3%	-2.7%
64505	Injection, anesthetic agent; sphenopalatine ganglion	\$145.72	\$105.39	\$143.1	\$103.8	-1.8%	-1.5%
64510	Injection, anesthetic agent; Stellate ganglion (cervical sympathetic)	\$148.09	\$76.92	\$144.0	\$75.3	-2.7%	-2.1%
64517	Superior Hypogastric Plexus Block	\$196.21	\$126.40	\$191.2	\$123.1	-2.6%	-2.6%
64520	Injection, anesthetic agent; lumbar or thoracic (paravertebral sympathetic)	\$232.81	\$84.38	\$226.5	\$83.2	-2.7%	-1.4%
64530	Injection, Celiac Plexus with or without fluoroscopic guidance	\$234.50	\$94.88	\$224.6	\$92.3	-4.2%	-2.7%
64553	Percutaneous implantation of neurostimulator electrode array; Cranial nerve	\$2,574.07	\$395.80	\$3,799.5	\$449.8	47.6%	13.8%
64555	Percutaneous implantation of Neurostimulator electrode array; peripheral nerve	\$2,196.91	\$327.01	\$2,084.4	\$316.9	-5.1%	-3.3%
64561	Percutaneous implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)	\$752.30	\$304.31	\$720.2	\$296.6	-4.3%	-2.5%

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64569	Revision or replacement of cranial nerve (e.g. vagus nerve) neurostimulator electrode array		\$785.17		\$768.7	-2.1%
64570	Removal of cranial nerve (e.g. vagus nerve) neurostimulator electrode array and pulse generator		\$756.70		\$739.9	-2.2%
64575	Incision for implantation of Neurostimulator electrode array; peripheral nerve (excludes sacral nerve)		\$310.41		\$310.4	0.3%
64581	Incision for implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)		\$659.11		\$642.3	-2.5%
64585	Revision or removal of peripheral neurostimulator electrode array	\$245.68	\$144.36	\$238.3	\$141.8	-3.0% -1.8%
64590	Insertion or Replacement of Peripheral Neurostimulator Pulse Generator or Receiver	\$266.69	\$162.32	\$434.4	\$289.1	62.9% 78.3%
64595	Revision or removal of peripheral nerve or neurostimulator generator	\$235.18	\$128.43	\$358.1	\$225.6	52.3% 75.9%
64600	Destruction by neurolytic agent, trigeminal nerve; supraorbital, infraorbital, mental, or inferior alveolar branch	\$473.40	\$234.16	\$470.8	\$234.1	-0.6% 0.0%
64605	Destruction by neurolytic agent, trigeminal nerve; 2nd and 3rd division branches at foramen ovale	\$659.11	\$355.48	\$893.7	\$423.0	35.6% 0.1%
64610	Destruction by neurolytic agent, trigeminal nerve; second and third division branches at foramen ovale with Fluro	\$798.72	\$490.69	\$762.5	\$476.0	-4.5% -2.9%
64612	Chemodenervation of muscle(s); muscle(s) innervated by facial nerve (eg, for blepharospasm, hemifacial spasm)	\$138.60	\$119.96	\$136.2	\$117.9	-1.7% -1.7%
64620	Destruction by neurolytic agent, intercostal nerve	\$211.12	\$178.25	\$206.9	\$174.2	-2.0% -2.4%
64624	Genicular nerve branches, Radiofrequency	\$394.45	\$146.05	\$381.7	\$142.7	-3.2% -2.2%
64625	Sacroiliac joint nerves, Radiofrequency	\$478.83	\$194.85	\$464.5	\$191.2	-3.0% -1.9%
64633	C/T facet joint nerve block(s) with radiofrequency thermoneurolysis	\$443.92	\$191.46	\$430.5	\$187.9	-3.0% -1.8%
64634	C/T facet joint nerve block(s) with radiofrequency thermoneurolysis - Addon	\$261.27	\$66.76	\$251.1	\$65.1	-3.9% -2.4%
64635	L/S facet joint nerve block(s) with radiofrequency thermoneurolysis	\$447.99	\$191.80	\$434.1	\$188.2	-3.1% -1.8%
64636	L/S facet joint nerve block(s) with radiofrequency thermoneurolysis - Addon	\$245.68	\$58.96	\$235.7	\$57.0	-4.1% -3.4%
64640	Destruction by neurolytic agent; other peripheral nerve or branch	\$249.75	\$118.61	\$244.2	\$116.5	-2.2% -1.7%
64680	Destruction by neurolytic agent, with or without radiologic monitoring; celiac plexus	\$352.77	\$162.32	\$334.9	\$156.8	-5.1% -3.4%

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72265	Contrast x-ray, lower spine	\$111.49		\$107.1		-4.0%
72265-TC	Contrast x-ray, lower spine	\$71.50		\$68.4		-4.3%
72270	Contrast x-ray of spine	\$167.40		\$149.9		-10.4%
72270-26	Contrast x-ray of spine	\$66.42	\$66.42	\$63.2	\$63.2	-4.9% -4.8%
72270-TC	Contrast x-ray of spine	\$100.98		\$86.8		-14.1%
72285	Diskography C/T Radiological supervision and interpretation	\$130.80		\$129.6		-0.9%
72285-26	Diskography C/T Radiological supervision and interpretation	\$55.91	\$55.91	\$54.0	\$54.0	-3.4% -3.4%
72285-TC	Diskography C/T Radiological supervision and interpretation	\$74.89		\$75.6		1.0%
72295	Diskography lumbar radiological supervision and interpretation	\$112.84		\$109.3		-3.1%
72295-26	Diskography lumbar radiological supervision and interpretation	\$39.99	\$39.99	\$38.3	\$38.3	-4.2% -4.2%
72295-TC	Diskography lumbar radiological supervision and interpretation	\$72.86		\$71.0		-2.5%
73525	Radiological examination, hip, arthrography, radiological supervision and interpretation	\$133.18		\$126.7		-4.9%
73525-26	Radiological examination, hip, arthrography, radiological supervision and interpretation	\$28.13	\$28.13	\$27.5	\$27.5	-2.2% -2.2%
73525-TC	Radiological examination, hip, arthrography, radiological supervision and interpretation	\$105.05		\$99.2		-5.6%
76000	Fluoroscopic examination	\$44.05		\$41.9		-4.9%
76000-26	Fluoroscopic examination	\$15.59	\$15.59	\$14.4	\$14.4	-7.6% -7.6%
76000-TC	Fluoroscopic examination	\$28.47		\$27.5		-3.4%
76942	Ultrasonic guidance for needle placement	\$58.96		\$57.0		-3.4%
76942-26	Ultrasonic guidance for needle placement	\$30.50	\$30.50	\$29.1	\$29.1	-4.5% -4.4%
76942-TC	Ultrasonic guidance for needle placement	\$28.47		\$27.8		-2.2%

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Disclaimer: Please note that the rates for 2023 and 2024 do not include the potential 4% PAYGO cuts



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2024 Final - Physician Payment Rates rates compared to 2023

The ACA sequester reductions of 2% are not applied for the years 2023 and 2024.

CPT	Description	2023 FINAL (CF=\$33.8872)		2024 Final with 3.39% Cut (CF=\$32.7375)			
		Non-Facility (Office)	Facility ASC/Hospital)	Non-Facility (Office)	Facility (ASC/Hospital)	% of change Non-Facility	% of change Facility
77002-26	Fluoroscopic guidance and localization of needle or catheter tip for spine or therapeutic injection procedure	\$27.11	\$27.11	\$25.9	\$25.9	-4.6%	-4.6%
77002-TC	Fluoroscopic guidance and localization of needle or catheter tip for spine or therapeutic injection procedure	\$91.50		\$88.1		-3.8%	
77003	Fluoroscopic guidance for spine injection	\$107.76		\$103.5		-4.0%	
77003-26	Fluoroscopic guidance and localization of needle or catheter tip for spine or therapeutic injection procedure	\$28.80	\$28.80	\$27.8	\$27.8	-3.4%	-3.4%
77003-TC	Fluoroscopic guidance and localization of needle or catheter tip for spine or therapeutic injection procedure	\$78.96		\$75.6		-4.2%	
95970	Alys npgt w/o prgrmg	\$18.98	\$18.64	\$18.3	\$17.7	-3.4%	-5.1%
95971	Alys smpl sp/pn npgt w/prgrm	\$48.12	\$38.97	\$47.1	\$37.6	-2.0%	-3.4%
95972	Alys cplx sp/pn npgt w/prgrm	\$56.93	\$40.66	\$55.7	\$39.0	-2.2%	-4.2%
99202	Office/outpatient visit new	\$72.86	\$48.12	\$71.0	\$46.2	-2.5%	-4.0%
99203	Office/outpatient visit new	\$112.84	\$83.02	\$109.7	\$79.9	-2.8%	-3.8%
99204	Office/outpatient visit new	\$167.40	\$133.52	\$164.3	\$130.0	-1.8%	-2.6%
99205	Office/outpatient visit new	\$220.94	\$181.30	\$216.7	\$176.8	-1.9%	-2.5%
99211	Office/outpatient visit established	\$23.38	\$8.81	\$22.9	\$8.5	-2.0%	-3.4%
99212	Office/outpatient visit established	\$56.93	\$35.58	\$55.7	\$34.4	-2.2%	-3.4%
99213	Office/outpatient visit established	\$90.82	\$66.08	\$89.4	\$64.2	-1.6%	-2.9%
99214	Office/outpatient visit established	\$128.43	\$97.60	\$126.0	\$94.6	-1.9%	-3.0%
99215	Office/outpatient visit established	\$179.94	\$143.34	\$177.4	\$140.4	-1.4%	-2.0%
99441	Phone e/m phys/ghp 5-10 min	\$56.25	\$34.90	\$55.3	\$34.0	-1.6%	-2.4%
99442	Phone e/m phys/ghp 11-20 min	\$90.82	\$66.08	\$89.0	\$63.8	-2.0%	-3.4%
99443	Phone e/m phys/ghp 21-30 min	\$127.75	\$96.92	\$126.0	\$94.6	-1.3%	-2.3%

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