CURONIX

2025 SPINAL CORD STIMULATION (SCS)

Coding and Payment Guide for Medicare Reimbursement

Physician Services (Facility and Non-Facility) Ambulatory Surgical Center

SCS Physician Services							
Procedure	CPT Code ¹	Description	Medicare RVUs ²		Medicare National Average Payment ²		
			Non- Facility	Facility	Non-Facility	Facility	
SCS Trial							
One Lead Trial	63650	Percutaneous implantation of neurostimulator electrode array, epidural	65.76	12.48	\$2,127	\$404	
Two Lead Trial	63650	Percutaneous implantation of neurostimulator electrode array, epidural	65.76	12.48	\$2,127 + \$2,127(FO%) -	\$404 + \$404(50%) = 606	
	63650	Percutaneous implantation of neurostimulator electrode array, epidural	65.76	12.48	\$2,127(50%) = 3,191		
		SCS Permanent In	nplant				
	63650	Percutaneous implantation of neurostimulator electrode array, epidural	NA	12.48	NA	\$404	
One Lead with Permanent SCS	63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver	NA	10.28	NA	\$333	
Two Leads with Permanent SCS	63650	Percutaneous implantation of neurostimulator electrode array, epidural	NA	12.48	NA	\$404 +	
	63650	Percutaneous implantation of neurostimulator electrode array, epidural	NA	12.48	NA	\$404(50%) = \$606	
	63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver	NA	8.87	NA	\$333	

SCS Physician Services							
Procedure	CPT Code ¹	Description	Medicare RVUs ²		Medicare National Average Payment ²		
			Non- Facility	Facility	Non-Facility	Facility	
SCS Revision or Removal							
Removal of Lead	63661	Removal of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	20.34	10.01	\$658	\$324	
Revision/ Replacement of Leads	63663	Revision including replacement, when performed, of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	26.58	13.58	\$860	\$439	
Revision/ Removal of Receiver	63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver, with detachable connection to electrode array	N/A	9.10	N/A	\$294	

Ambulatory Surgical Center (ASC)								
Procedure	CPT Code ¹	Description	Status Indicator ²	Medicare National Average Payment ²				
SCS Trial								
One Lead Trial	63650	Percutaneous implantation of neurostimulator electrode array, epidural	J8	\$5,084				
Two Lead Trial	63650	Percutaneous implantation of neurostimulator electrode array, epidural	8L	¢5.004¢5.004¢10.160				
	63650	Percutaneous implantation of neurostimulator electrode array, epidural	8L	\$5,084 + \$5,084 = \$10,168				
SCS Permanent Implant								
One Lead with Permanent SCS	63650	Percutaneous implantation of neurostimulator electrode array, epidural	J8	\$5,084				
	63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver	8L	\$26,282				
	63650	Percutaneous implantation of neurostimulator electrode array, epidural	8L	¢5.004¢5.004¢10.160				
Two Leads with	63650	Percutaneous implantation of neurostimulator electrode array, epidural	8L	\$5,084 + \$5,084 = \$10,168				
Permanent SCS	63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver	ßL	\$26,282				
		SCS Revision or Re	emoval					
Removal of Lead	63661	Removal of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	G2	\$925				
Revision/ Replacement of Leads	63663	Revision including replacement, when performed, of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	ßL	\$5,159				
Revision/ Removal of Receiver	63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver, with detachable connection to electrode array	A2	\$1,944				

	HCPCS II Codes ³	СРТ	MUEs ⁴	Global Days ²	MPRR ⁵
L8680	Implantable neurostimulator electrode, each	63650	2	10	Y
L8682	Implantable neurostimulator radiofrequency receiver	63685	1	10	Y
L8683	Radiofrequency transmitter (external) for use with implantable neurostimulator radiofrequency receiver	63661	1	10	Y
20005		63663	1	10	Y
C1778	Lead, neurostimulator (implantable)	63688	1	10	Y
C1816	Receiver and/or transmitter, neurostimulator (implantable)		•		· ·

This document is for informational purposes only and should not be construed as authoritative. It is not intended to increase or maximize payment by any third-party payer. This information is current as of January 2025 and is based upon publicly available source information. Codes and payment values are subject to frequent change without notice. Healthcare providers are solely responsible for the accuracy of the codes assigned to the services or items in the medical record. Providers are encouraged to contact the American Medical Association, relevant medical societies, CMS, or third-party payers with questions relative to coding, payment, or policy. Items and services billed to third party payers must be medically necessary and supported by appropriate documentation. Final coding for any procedure is at the discretion of the healthcare provider.

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⁵ Multiple procedure reduction rules apply for procedures per Optum EncoderPro.

² CMS-1807-FC. Medicare 2025 Physician Fee Schedule – January 2025 Addendum B updates. 2025 Conversion Factor \$32.35. CMS-1809-FC Addendum B.-OPPS Payment by HCPCS Code for CY 2025 and Addendum AA -- Final ASC Covered Surgical Procedures for CY 2025. ³2025 HCPCS Level II Expert. © 2024 Optum, Inc. All rights reserved.

⁴ NCCI Edits at https://www.cms.gov/medicare/coding-billing/national-correct-coding-initiative-ncci-edits/medicare-ncci-medically-unlikelyedits.