

Neurosurgery Codes

AS OF JANUARY 1, 2025

CPT® Codes			
	CODE	DESCRIPTION	MEDICARE WORK RVUS
Cortical Electrode Implantation	61850	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cortical	13.34
	61860	Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral, cortical	22.26
Depth Electrode Implantation	61863	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (e.g., thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; first array	20.71
	61864	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (e.g., thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)	4.49
Neurostimulator Insertion	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)	25.75
Neurostimulator Replacement or Revision	61891	Revision or replacement of skull-mounted cranial neurostimulator pulse generator or receiver with connection to depth and/or cortical strip electrode array(s)	11.25
Removal of Neurostimulator	61892	Removal of skull-mounted cranial neurostimulator pulse generator or receiver with cranioplasty, when performed	15.00
Revision or Removal of Electrodes	61880	Revision or removal of intracranial neurostimulator electrodes	6.95

ICD-10-CM Diagnosis Codes		
CODE	DESCRIPTION	
G40.011	Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, with status epilepticus	
G40.019	Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, without status epilepticus	
G40.111	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, with status epilepticus	
G40.119	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, without status epilepticus	
G40.211	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, with status epilepticus	
G40.219	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, without status epilepticus	
Z45.42	Encounter for adjustment and management of neurostimulator	

Coding Guide Neurosurgery Codes

About NeuroPace and the RNS® System

NeuroPace develops, manufactures and markets implantable devices for the treatment of neurological disorders by responsive brain stimulation. The company's first product, the RNS® System, is the only FDA-approved brain-responsive neurostimulator for the treatment of drug-resistant focal onset epilepsy.

FDA Indication for Use

The RNS® System is an adjunctive therapy in reducing the frequency of seizures in individuals 18 years of age or older with partial onset seizures who have undergone diagnostic testing that localized no more than 2 epileptogenic foci, are refractory to two or more antiepileptic medications, and currently have frequent and disabling seizures (motor partial seizures, complex partial seizures and/or secondarily generalized seizures). The RNS® System has demonstrated safety and effectiveness in patients who average 3 or more disabling seizures per month over the three most recent months (with no month with fewer than two seizures), and has not been evaluated in patients with less frequent seizures.

See labeling available at www.NeuroPace.com for prescribing information, including indications, contraindications, warnings, precautions and adverse events.

This document has been prepared for providers using the RNS* System, and is intended for informational purposes only. NeuroPace does not promise or guarantee coverage or any level of payment by any third party payer. While NeuroPace believes this information to be correct, it is subject to change at any time. As with all reimbursement claims, providers are solely responsible for determining the appropriate codes, modifiers and charges for services provided. NeuroPace recommends that you contact your local payer with questions regarding coding and payment guidelines.

The 2025 Medicare RVUs can be found in Regulation CMS-1807-F Medicare and Medicaid Programs; CY 2025 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment and Coverage Policies. The complete Medicare Physician Fee Schedule can be found at https://www.cms.gov/medicare/physician-fee-schedule/search/overview.

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