

2025-2026 Radiology & IR CPT Code Comparison

Effective January 1, 2026, several high-volume radiology and interventional radiology (IR) procedures shifted to new reporting structures. This crosswalk summarizes the specific 2025 codes and reporting patterns that are now combined, bundled, or replaced under the 2026 CPT code set.

Area	2025 Reporting	2026 Reporting	Key Changes
CTA head and CTA neck	CTA head 70496 & CTA neck 70498 when both were performed/reported separately	70471 for CTA head and neck when performed together	New combined CTA head/neck code. 70496 and 70498 remain available when only one region is performed
CT cerebral perfusion	Category III 0042T	+70472 with concurrent CT/CTA of same anatomy; 70473 without concurrent CT/CTA	Category III code 0042T replaced by Category I codes
Coronary plaque assessment from coronary CTA (AI-enabled)	Category III codes 0623T–0626T	75577 for coronary plaque quantification/characterization derived from augmentative software analysis of a coronary CTA dataset, with interpretation and report	Category III code family 0623T–0626T replaced by Category I 75577
Head/neck embolization RS&I	Embolization codes 61624/61626 with separate RS&I/imaging component codes, e.g., 75894/75898 , when supported	Revised codes 61624 & 61626 now include RS&I, roadmapping, and imaging guidance necessary for the intervention	RS&I codes for intraprocedural roadmapping/imaging guidance are no longer reported separately with 61624/61626

Lower extremity revascularization	Deleted family 37220–37235	New family 37254–37299 , organized by territory, vessel, treatment, and straightforward vs complex lesion	New 2026 codes include same-artery catheterization/crossing and imaging guidance/RS&I
Lower extremity IVL	No territory-specific IVL add-on codes	New territory-specific add-on codes: +37262 for iliac IVL & +37279 for femoral/popliteal IVL	Imaging guidance/RS&I needed to perform IVL is included in the new add-on codes
TEVAR/thoracic endograft services	Separate codes for access, sizing, RS&I, and guidance	New code: 33882 ; Revised codes: 33880, 33881, 33883, 33886 ; Deleted codes: 33884, 33889, 33891	New/revised codes bundle pre-procedure sizing/device selection, nonselective catheterization, and associated RS&I. Legacy RS&I codes 75956–75959 deleted
Prostate biopsy	55700 plus separately reportable imaging guidance when supported, depending on method	55700 deleted; new 55707–55715 describe approach/guidance and include imaging guidance	New codes are selected based on the biopsy approach, imaging guidance method, and whether targeted lesion sampling was performed
IRE ablation liver/prostate	Category III 0600T	New Category I 47384 for liver IRE and 55877 for prostate IRE; both include imaging guidance	Category III 0600T replaced by Category I codes for liver/prostate; imaging guidance is included. 0600T continues for IRE of other organs

