

ANNOUNCEMENT

Two New CPT Codes

For Percutaneous
Radiofrequency Ablation
of Thyroid Nodules

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Effective January 1, 2025

On December 9th, the Centers for Medicare & Medicaid Services (CMS) released the [CY 2025 MPFS Final Rule](#). In this rule, CMS finalized the valuation and established the official CPT[®] codes for percutaneous radiofrequency ablation of the thyroid.

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60660: Ablation of 1 or more thyroid nodule(s), one lobe or the isthmus, percutaneous, including imaging guidance, radiofrequency

60661: Ablation of 1 or more thyroid nodule(s), additional lobe, percutaneous, including imaging guidance, radiofrequency
(List separately in addition to code for primary procedure)

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The assignment of specific CPT[®] codes signifies acceptance of thyroid RFA as a standard medical procedure, potentially increasing its adoption.

A Rule by the Centers for Medicare & Medicaid Services on 12/09/2024.

These regulations are effective on January 1, 2025.

(10) Percutaneous Radiofrequency Ablation of Thyroid (CPT Codes 60660 and 60661)

In January 2024, the RUC surveyed codes 60660 (*Ablation of 1 or more thyroid nodule(s), one lobe or the isthmus, percutaneous, including imaging guidance, radiofrequency*) and its respective add-on code 60661 (*Ablation of 1 or more thyroid nodule(s), additional lobe, percutaneous, with imaging guidance, radiofrequency*) and recommended both work RVUs and PE values for this code family.

For CPT code 60660, the RUC recommended a work RVU of 5.75 and we proposed the RUC-recommended work RVU of 5.75.

For add-on code CPT 60661, the RUC recommended a work RVU of 4.25 and we proposed the RUC-recommended work RVU for this code. We also proposed the RUC-recommended direct PE values for both codes 60660 and 60661.

Comment: Many commenters supported the CMS proposal of the RUC-recommended work RVUs for CPT codes 60660 and 60661. These commenters urged CMS to finalize the values as proposed.

Response: We appreciate the support for our proposed work RVUs from the commenters.

Comment: Several commenters stated that they supported the proposed work RVUs for CPT codes 60660 and 60661, however the commenters expressed significant concerns regarding the reimbursement challenges faced by endocrinologists in private non-facility-based practices for the Radiofrequency Ablation (RFA) of thyroid nodules. The commenters stated that there are critical issues that need to be addressed to ensure continued access to this important procedure for patients in need. These issues included the high cost of the RF electrode which poses a significant financial burden on practices, a reimbursement gap for endocrinologists in non-facility-based practices, the upfront costs of RFA equipment and consumables which threaten to impact patient access to these services, and that there are sustainability concerns regarding the current reimbursement model for RFA procedures. The commenters urged CMS to reconsider the reimbursement framework for RFA procedures, taking into account the full range of practice expenses, including essential consumables like the RF electrode.

Response: We appreciate the additional information submitted by the commenters regarding the issues involving reimbursement for these radiofrequency ablation services. Although this discussion is beyond the scope of this particular code family, if the commenters believe that the valuation of the RF electrode (SD368) supply at \$1995.00 does not reflect current market pricing, we would encourage them to submit invoices via email to the PE_Price_Input_Update@cms.hhs.gov inbox as described in the PE section of this final rule.

After consideration of the comments, we are finalizing the work RVUs and direct PE inputs for the codes in the Percutaneous Radiofrequency Ablation of Thyroid family as proposed.

<https://www.federalregister.gov/documents/2024/12/09/2024-25382/medicare-and-medicaid-programs-cy-2025-payment-policies-under-the-physician-fee-schedule-and-other> The PFS Addenda along with other supporting documents and tables referenced in this final rule are available on the CMS website at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/index.html>

CMS - Centers for Medicare and Medicaid Services

CPT - Current Procedure Terminology

CPT is a registered trademark of the American Medical Association (AMA).

American Academy of Otolaryngology - Head and Neck Surgery (AAO-HNS), Federal Register

RUC - American Medical Association (AMA) Relative Value Scale Update Committee

RVU - national uniform relative value units

PE - practice expense

PFS - physician fee schedule

RFA - Radiofrequency Ablation of thyroid nodules

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