

Category III Codes

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Authority: [32 CFR 199.2\(b\)](#) and [32 CFR 199.4\(g\)\(15\)](#)

1.0 CPT¹ PROCEDURE CODES

0003T, 0008T, 0016T - 0019T, 0021T, 0024T, 0026T - 0032T, 0041T - 0161T

2.0 DESCRIPTION

Category III codes are a set of temporary codes for emerging technology, services, and procedures. These codes are used to track new and emerging technology to determine applicability to clinical practice. When a Category III code receives a Category I code from the American Medical Association (AMA) it does not automatically become a benefit under TRICARE. However, the codes that may have moved from unproven to proven must be forwarded to the Office of Medical Benefits and Reimbursement **Branch** (MB&RB) for coverage determination/policy clarification.

3.0 POLICY

3.1 Category III codes are to be used instead of unlisted codes to allow the collection of specific data. TRICARE has not opted to track Category III codes at this time.

3.2 Category III codes are excluded from coverage since clinical safety and efficacy or applicability to clinical practice has not been established.

4.0 EXCEPTIONS

4.1 Category III code 0024T may be covered under the Rare Disease Policy for children.

4.2 FDA IDE (Category B) clinical trial. See [Chapter 8, Section 5.1](#).

4.3 **Category III codes 0145T - 0151T as outlined in [Chapter 5, Section 1.1](#).**

5.0 EXCLUSION

Unlisted codes for **C**ategory III codes. Effective January 1, 2002.

- END -

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