2026 Instrumented Posterolateral Arthrodesis
Billing Guidance

Physician

CPT Code[1]	CPT Code Description	RVU (CF 33.40)	2026 Medicare National Average Payment
22612	Arthrodesis, posterior or posterolateral technique, single interspace: lumbar (with lateral transverse technique, when performed)	43.93	$1,312.53
22840	Posterior non-segmental instrumentation (eg, Harrington rod technique, pedicle fixation across 1 interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation) (List separately in addition to code for primary procedure)	20.01	$591.37
20930	Allograft, morselized, or placement of osteopromotive material, for spine surgery only (List separately in addition to code for primary procedure)	N/A	Bundled Code

ASC

CPT Code[1]	CPT Code Description	PI	2026 Medicare National Average Payment
22612	Arthrodesis, posterior or posterolateral technique, single interspace: lumbar (with lateral transverse technique, when performed)	J8	$13,491.52
22840	Posterior non-segmental instrumentation (eg, Harrington rod technique, pedicle fixation across 1 interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation) (List separately in addition to code for primary procedure)	N1	N/A
20930	Allograft, morselized, or placement of osteopromotive material, for spine surgery only (List separately in addition to code for primary procedure)	N1	N/A

Hospital Outpatient

CPT Code[1]	CPT Code Description	SI	APC	2026 Medicare National Average Payment
22612	Arthrodesis, posterior or posterolateral technique, single interspace: lumbar (with lateral transverse technique, when performed)	J8	5116	$17,228.14
22840	Posterior non-segmental instrumentation (eg, Harrington rod technique, pedicle fixation across 1 interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation) (List separately in addition to code for primary procedure)	N1	N/A	N/A
20930	Allograft, morselized, or placement of osteopromotive material, for spine surgery only (List separately in addition to code for primary procedure)	N1	N/A	N/A

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Example Diagnosis

Primary Diagnosis Codes	Diagnosis Code Description
M53.2X6	Spinal instabilities, lumbar region
M51.16	Intervertebral disc disorders with radiculopathy, lumbar region
M43.16	Spondylolisthesis, lumbar region
M47.26	Other spondylosis with radiculopathy, lumbar region
M54.16	Radiculopathy, lumbar region

Commercial (Private) Payers

Coverage for Posterolateral Spinal Arthrodesis varies by payer policy. We encourage providers to contact non-Medicare payers to confirm coverage prior to performing procedure.

CMS Final Rule 2026

https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2026-ipps-final-rule-home-page

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