

## Utilization Review Matrix 2022 ConnectiCare Musculoskeletal Surgery (Spine)

LUMBAR SPINE SURGERY					
Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes	Other Procedure Names
<p><i>Authorization is provided for the <u>primary surgery</u> requested.</i></p> <p><i>There are multiple CPT codes that can be associated with each procedure. These are assumed to be part of the primary surgery request and when completed in combination, do not require a separate authorization.</i></p>				<p><i>These codes do not require prior authorization.</i></p> <p><i>If the main surgical procedure is approved, these codes are understood to be included in conjunction and do not require precertification from the health plan.</i></p> <p><i>*Please note: This is not an all-inclusive list of every ancillary code.</i></p>	
<b>Lumbar Microdiscectomy</b>	<b>63030</b>	62380, 63030, +63035			Discectomy
<b>Lumbar Decompression</b>	<b>63047</b>	63005, 63012, 63017, 63042, +63044, 63047,	<b>Microdiscectomy:</b> 62380, 63030, +63035		Laminectomy, Laminotomy, Foraminotomy

<sup>1</sup>National Imaging Associates, Inc. is a subsidiary of Magellan Healthcare, Inc.

		+63048, 63056, +63057			
<b>Lumbar Fusion - Single Level</b>	<b>22612</b>	22533, 22558, 22612, 22630, 22633, +63052, +63053	<b>Microdiscectomy:</b> 62380, 63030, +63035  <b>Decompression:</b> 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	<b>Instrumentation:</b> +22840, +22841, +22842, +22845, +22853  <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938  <b>Bone Marrow Aspiration:</b> 20939	ALIF, TLIF, PLIF, XLIF, OLIF, Postero- lateral fusion
<b>Lumbar Fusion - Multiple Levels</b>	<b>22614</b>	+22534, +22585, +22614, +22632, +22634, +63052, +63053	<b>Microdiscectomy:</b> 62380, 63030, +63035  <b>Decompression:</b> 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057  <b>Single Level Fusion:</b> 22533, 22558, 22612, 22630, 22633	<b>Instrumentation:</b> +22840, +22841, +22842, +22845, +22853  <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938  <b>Bone Marrow Aspiration:</b> 20939	ALIF, TLIF, PLIF, XLIF, OLIF, Postero- lateral fusion
<b>Lumbar Artificial Disc – Single Level</b>	<b>22857</b>	22857, 22862, 22865			Disc replacement, LADR
<b>Lumbar Artificial Disc – Multiple Levels</b>	<b>+0163T</b>	+0163T, +0164T, +0165T	<b>Single-Level Artificial Disc:</b> 22857, 22862, 22865		<b>Disc replacement, LADR</b>
<b>Sacroiliac Joint Fusion</b>	<b>27279</b>	27279			Sacroiliac joint arthrodesis, Percutaneous SIJ Fusion

## CERVICAL SPINE SURGERY

Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes	Other Procedure Names
<p style="text-align: center;"><i>Authorization is provided for the <u>primary surgery</u> requested. There are multiple CPT codes that can be associated with each procedure. These are assumed to be part of the primary surgery request and when completed in combination, do not require a separate authorization.</i></p>				<p><i>These codes do not require prior authorization.</i></p> <p><i>If the main surgical procedure is approved, these codes are understood to be included in conjunction and do not require precertification from the health plan.</i></p> <p><i>*Please note: This is not an all-inclusive list of every ancillary code.</i></p>	
Cervical Anterior Decompression (without fusion)	63075	63075, +63076		<b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308  <b>Instrumentation:</b> +22859	
Anterior Cervical Decompression with Fusion - Single Level	22551	22548, 22551, 22554	<b>Decompression:</b> 63075, +63076  <b>Removal of Artificial Disc:</b> 22864	<b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308  <b>Instrumentation:</b> +22845, 22853, 22854  <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938	ACDF

<b>Anterior Cervical Decompression with Fusion - Multiple Levels</b>	<b>22552</b>	+22552, +22585	<b>Decompression:</b> 63075, +63076 <b>Single-Level ACDF:</b> 22548, 22551, 22554 <b>Removal of Artificial Disc:</b> 22864	<b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308 <b>Instrumentation:</b> +22845, +22846, 22853, 22854 <b>Bone Grafts:</b> 20930, +20931, +20936, +20937, +20938 <b>Bone Marrow Aspiration:</b> 20939	ACDF
<b>Cervical Posterior Decompression (without fusion)</b>	<b>63045</b>	63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051			Lamino-foraminotomy, Laminectomy
<b>Cervical Posterior Decompression with Fusion - Single Level</b>	<b>22600</b>	22590, 22595, 22600	<b>Decompression:</b> 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051	<b>Instrumentation:</b> +22840, +22841 <b>Bone Grafts:</b> +20930, +20931, +20936, +20937	Posterior fusion, Arthrodesis
<b>Cervical Posterior Decompression with Fusion - Multiple Levels</b>	<b>22595</b>	22595, +22614	<b>Decompression:</b> 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051 <b>Single-Level Fusion:</b> 22590, 22595, 22600	<b>Instrumentation:</b> +22840, +22841, +22842, +22843, +22844 <b>Bone Grafts:</b> +20930, +20931, +20936, +20937	Posterior fusion, Arthrodesis
<b>Cervical Artificial Disc - Single Level</b>	<b>22856</b>	22856, 22861	<b>Removal of Artificial Disc:</b> 22864	<b>Instrumentation:</b> 22845, 22853 <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938	Disc replacement, Disc arthroplasty, CADR
<b>Cervical Artificial Disc - Two Levels</b>	<b>22858</b>	+22858, +0098T, +0095T	<b>Single-Level Artificial Disc:</b> 22856, 22861 <b>Removal of Artificial Disc:</b> 22864	<b>Instrumentation:</b> 22845, 22853 <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938	Disc replacement, Disc arthroplasty, CADR

**DEFORMITY SURGERY, THORACIC SURGERY & OTHER SURGERIES**

Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes	Other Procedure Names
<p align="center">Authorization is provided for the <u>primary surgery</u> requested.                      There are multiple CPT codes that can be associated with each procedure. These are assumed to be part of the primary surgery request and when completed in combination, do not require a separate authorization.</p>				<p>These codes do not require prior authorization.                      If the main surgical procedure is approved, these codes are understood to be included in conjunction and do not require precertification from the health plan.                      *Please note: This is not an all-inclusive list of every ancillary code.</p>	
<p><b>Deformity Surgery</b>  <i>(Pediatric Deformity: NIA requires registration of all pediatric deformity surgeries performed on patients who are age ≤17 years of age.)</i></p>	<p align="center"><b>22802</b></p>	<p>22800, 22802, 22804, 22808, 22810, 22812, 22830, 22630, +22632, 22206, 22207, +22208, 22210, 22212, 22214, +22216, 22220, 22222, 22224, +22226, 22558, 22633, +22614</p>	<p><b>Decompression:</b> 63030, 63035, 63042, 63044, 63046, 63047, 63048, 63055</p>	<p><b>Instrumentation:</b> 22840, 22841, 22842, 22843, 22844, 22845, 22846, 22848, 22851 22847, 22851  <b>Removal of instrumentation:</b> 22849, 22850, 22852, 22855  <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938  <b>Bone Marrow Aspiration:</b> 20939</p>	<p>Deformity correction, Scoliosis correction</p>
<p><b>Thoracic Surgery (Non-Deformity)</b></p>	<p align="center"><b>22610</b></p>	<p>22532, +22534, 22556, 22585, 22610, +22614, 22830, 63003, 63016, 63046, +63048, 63055, +63057, 63064, +63066, 63077, +63078</p>	<p><b>Osteotomy:</b> 22212, 22216, 22222, 22226  <b>Corpectomy:</b> 63082, 63085, 63086, 63087, 63088, 63090, 63091, 63101, 63103</p>	<p><b>Instrumentation:</b> 22840, 22841, 22842, 22843, 22844, 22845, 22846, 22847, 22848, 22851  <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938  <b>Bone Marrow Aspiration:</b> 20939</p>	

<b>Spine Surgery Other: Neoplasm, Lesion, Infection (All Regions)</b>  (cont.)	<b>63267</b>	<b>Lesion Decompression:</b> 63265, 63266, 63267, 63268, 63270, 63271, 63272, 63273, 63275, 63276, 63277, 63278, 63280, 63281, 63282, 63283, 63285, 63286, 63287, 63290, 63295. 63290, 63295 <b>Fusion:</b> 22590, 22595, 22600, 22610, 22612, 22614.22630, 22632, 22633, 22634, 22554, 22556, 22558, 22585, 22532, 22533, 22534	<b>Excision:</b> 22100, 22101, 22102, 22103, 22110, 22112, 22114, 22116  <b>Corpectomy:</b> 63301,63302, 63305, 63306, 63308, 63101, 63103	<b>Instrumentation (when fusion):</b> 22840, 22841, 22842, 22843, 22844, 22848, 22851, 22845, 22846, 22847, 22851  <b>Dural Repairs:</b> 63707, 63709, 63710	
--	--------------	--	---	--	--

### Other Spine Procedures or Devices - No or Limited Evidence of Effectiveness

ConnectiCare will not provide reimbursement for the following CPT codes as there is no or limited evidence these procedures are effective. NIA prior authorization may be requested to review extenuating or unique clinical circumstances on a case-by-case basis.

Procedure Name	Primary CPT Code	Allowable Billed Groupings
Pre-Sacral/Axial Interbody Fusion	22586	22586
Total Facet Arthroplasty	0202T	0202T

- *Payment for procedures is contingent on the patient's eligibility and plan limitations, if any, at the time the service is delivered.*
- *Musculoskeletal surgery services rendered through the Emergency Department are not managed by Magellan Healthcare*
- *Magellan Healthcare does not prior authorize or manage the facility precertification for musculoskeletal surgery services*
- *Add-on codes (+) do not require separate authorization and are to be used in conjunction with approved primary code for the service rendered.*
  - *Exception: multiple level add-on codes require an authorization for multiple level procedures*

**Please note:**

- Pediatric deformity spine surgery for patients under 18 will require pre-registration but will not be subject to preauthorization review including submission of documentation.

**Inpatient Stays -**

- All inpatient and outpatient spine surgery or implantable infusion pump insertion are managed by NIA as outlined above.
- CCI Facility Management will manage the inpatient lengths of stay according to current internal processes.