



MVP Health Plan
2019 Spine Surgery Authorization and CPT Coding Reference Guide

1. PROCEDURES WITHIN PROCEDURES

Does the ordering surgeon need a separate request for all spine procedures being performed during the same surgery on the same date of service?

No. Magellan Healthcare¹ will provide a list of Surgery categories to choose from and the Surgeon must select the most complex Surgery being performed as the Primary Surgery.

Example: Lumbar Fusion

If the Surgeon is planning a single level Lumbar Spine Fusion with decompression, the Surgeon will select the Single Level fusion procedure. The Surgeon does not need to request a separate authorization for the decompression procedure being performed as part of the Lumbar Fusion Surgery. This is included in the Lumbar Fusion request.

Example: Decompression

If a Surgeon is planning Laminectomy with a Microdiscectomy, the Surgeon will select the Lumbar decompression procedure. The Surgeon does not need to request a separate authorization for the Microdiscectomy procedure.

2. MULTIPLE CPT CODES

Will the ordering Physician need to enter each CPT procedure code being performed for Spine Surgery?

No. Magellan Healthcare will provide a list of surgery categories to choose from and the ordering physician must select the primary surgery (most invasive/complex) being performed.

Are instrumentation (medical device), bone grafts, and bone marrow aspiration included as part of the lumbar or cervical fusion authorizations?

Yes. The instrumentation (medical device), bone grafts, and bone marrow aspiration procedures commonly performed in conjunction with a single or multiple level lumbar or cervical spine fusion are included in the fusion surgery authorization. The amount of instrumentation must align with the authorization.

3. MULTIPLE SURGEONS/PRACTITIONERS:

Does the assistant surgeon need an authorization?

No. It is common for two professionals (surgeons) to be involved in a spine surgery case. The authorization covers more than one professional billing for the service.

The following pages provides a summary of which CPT codes and procedures are associated with the **Primary Surgery** authorization

Cervical Spine Surgery		
<i>Payment for procedures is contingent on the patient's eligibility and plan limitations, if any at the time the service is delivered.</i>		
Authorization Primary Surgical Procedure and CPT Codes	Additional Surgical Procedures Covered for Decompressions and Fusions	Other Ancillary Procedures Covered by Authorization
<i>Magellan/NIA provides authorization for <u>primary surgery</u> requested. Any of the listed CPT code procedures codes can be submitted on the claim for the authorized procedure. *Parent code authorized for primary surgery highlighted in yellow</i>	<i>There are multiple procedures associated with a spine surgery. Magellan/NIA provides an authorization for the <u>primary</u> surgery requested. However, associated surgery procedures are covered by the authorization. Examples below</i>	<i>The instrumentation (medical device), bone grafts, and bone marrow aspiration are procedures commonly performed in conjunction with a single or multiple level lumbar or cervical spines. Examples below: Note: This is not an extensive listing of all procedures that may be covered with the primary procedure.</i>
Anterior Cervical Decompression (without fusion) 63075, +63076		Vertebral Corpectomy: 63081, +63082, 63300, 63304, +63308 Instrumentation: +22859
Anterior Cervical Decompression with Fusion (ACDF) —Single Level 22548, 22551, 22554	Decompression (rare) 63075	Vertebral Corpectomy: 63081, 63082, 63300, 63304, 63308 Instrumentation: +22845, +22846, 22853, 22854 Bone Grafts: 20930, +20931, +20936, +20937, +20938 Bone Marrow Aspiration: 20939
Anterior Cervical Decompression with Fusion (ACDF)—Multiple Level 22548, 22551, 22554, +22552, +22585	Decompression (rare) 63075, 63076 Single Level Fusion (ACDF) 22548, 22551, 22554	Vertebral Corpectomy: 63081, 63082, 63300, 63304, 63308 Instrumentation: +22845, +22846, 22853, 22854 Bone Grafts: 20930, +20931, +20936, +20937, +20938 Bone Marrow Aspiration: 20939
Cervical Posterior Decompression (without fusion) 63001, 63015, 63020,+63035, 63040, +63043, 63045, +63048, 63050, 63051		
Cervical Posterior Decompression with Fusion— Single Level** 22590, 22595, 22600	Cervical Posterior Decompression (for single level fusion) 63001, 63020, 63040, 63045, 63050	Instrumentation: +22840, +22841 Bone Grafts: +20930, +20931, +20936, +20937
Cervical Posterior Decompression with Fusion— Multiple Levels ** 22590, 22595, 22600, +22614	Cervical Posterior Decompression 63001, 63015, 63020,+63035, 63040, +63043, 63045, +63048, 63050, 63051 Cervical Posterior Decompression with Fusion: 22590, 22595, 22600	Instrumentation: +22840, +22841, +22842, +22843, +22844 Bone Grafts: +20930, +20931, +20936, +20937
Cervical Artificial Disc - Single Level 22856, 22861, 22864	If removal of artificial disc is (22864) authorization to include Fusion 22554	If removal of artificial disc (22864) authorization to include : Instrumentation: 22845, ,22853

		Bone Grafts: +20930, +20931, +20936, +20937, +20938
Cervical Artificial Disc -Two Levels 22858, 0098T, 0095T	Single Level : 22856, 22861, 22864 If removal of artificial disc (22864 with 0095T) authorization to include :Fusion :22554	If removal of artificial disc (22864 with 0095T) authorization to include : Instrumentation: 22845 ,22853 Bone Grafts: +20930, +20931, +20936, +20937, +20938

Lumbar Spine Surgery		
<i>Payment for procedures is contingent on the patient's eligibility and plan limitations, if any at the time the service is delivered.</i>		
Authorization Primary Surgical Procedure and CPT Codes	Additional Surgical Procedures Covered for Decompressions and Fusions	Other Ancillary Procedures Covered by Authorization
<i>Magellan/NIA provides authorization for <u>primary surgery</u> requested. Any of the listed CPT code procedures codes can be submitted on the claim for the authorized procedure. *Parent code authorized for primary surgery highlighted in yellow</i>	<i>There are multiple procedures associated with a spine surgery. Magellan/NIA provides an authorization for the <u>primary surgery</u> requested. However, associated surgery procedures are covered by the authorization. Examples below</i>	<i>The instrumentation (medical device), bone grafts, and bone marrow aspiration are procedures commonly performed in conjunction with a single or multiple level lumbar or cervical spines. Examples below. Note: This is not an extensive listing of all procedures that may be covered with the primary procedure.</i>
Lumbar Microdiscectomy 63030, +63035, 62380		
Lumbar Decompression 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	Microdiscectomy: 63030, +63035,62380	
Lumbar Fusion—Single Level** 22533, 22558, 22612, 22630, 22633	Decompression Procedures: 63030, +63035, 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057,62380	Instrumentation: +22840, +22841, +22842, +22845, +22853 Bone Grafts: +20930, +20931, +20936, +20937, +20938 Bone Marrow Aspiration: 20939
Lumbar Fusion—Multiple Levels** +22534, +22585, +22614, +22632, +22634	Single Level Fusion: 22533, 22558, 22612, 22630, 22633 Decompression Procedures: 63030, +63035, 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057,62380	Instrumentation: +22840, +22841, +22842, +22845, +22853 Bone Grafts: +20930, +20931, +20936, +20937, +20938 Bone Marrow Aspiration: 20939

*The **parent code** is the primary procedure code provided to the health plan for authorization and claims payment. The other procedure codes associated with **parent code** are included as part in the authorization.