



Tufts Health Public Plan
Commercial, Exchange and Medicaid Members only
Utilization Review Matrix 2022
Outpatient Interventional Pain Management (IPM)

The matrix below contains the CPT 4 codes for which Magellan Healthcare authorizes on behalf of Tufts Health Public Plan.

Magellan Healthcare issues authorizations based on the primary CPT code and its allowable billed groupings. A procedure can be billed under any **one** of the given CPT codes for that allowable billed grouping as long as a valid authorization number has been issued within the validity period.

Please note: *Interventional pain management services rendered in an Emergency Room, Observation Room, Intraoperatively, or as a Hospital Inpatient are not managed by NIA

Procedure Name	Primary CPT Code	Allowable Billed Groupings
Cervical/Thoracic Interlaminar Epidural	62321	62320, 62321, 64479, +64480
Cervical/Thoracic Transforaminal Epidural	64479	62320, 62321, 64479, +64480
Lumbar/Sacral Interlaminar Epidural	62323	62322, 62323, 64483, +64484
Lumbar/Sacral Transforaminal Epidural	64483	62322, 62323, 64483, +64484
Cervical/Thoracic Facet Joint Block ¹	64490	64490, + 64491, +64492
Lumbar/Sacral Facet Joint Block ¹	64493	64493, +64494, +64495
Cervical/Thoracic Facet Joint Radiofrequency Neurolysis	64633	64633, +64634
Lumbar/Sacral Facet Joint Radiofrequency Neurolysis	64635	64635, +64636

- *Add-on codes (+) do not require separate authorization and are to be used in conjunction with approved primary code for the service rendered.*
- *NOTE: due the repeat nature of IPM procedures, multiple authorizations may exist within the same validity period*

¹National Imaging Associates, Inc. is a subsidiary of Magellan Healthcare, Inc.

- ¹ CPT codes for procedures performed with ultrasound guidance are not a covered service and are not reimbursable: 0213T, +0214T, +0215T, 0216T, +0217T, +0218T