

**Superior HealthPlan
(Non CHIP Members)
Utilization Review Matrix 2022
Outpatient Interventional Pain Management (IPM)**

The matrix below contains all of the CPT 4 codes for which National Imaging Associates, Inc. (NIA) authorizes on behalf of Superior HealthPlan.

National Imaging Associates 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: IPM services rendered in an Emergency Room, Intraoperatively, or as a Hospital Inpatient are not managed by NIA.**

Procedure Name	Primary CPT Code	Allowable Billed Groupings
Sacroiliac Joint Injection	27096	27096, G0260
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	64490	64490, + 64491, +64492, 0213T, +0214T, +0215T
Lumbar/Sacral Facet Joint Block	64493	64493, +64494, +64495, 0216T, +0217T, +0218T
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. NIA does not manage interventional pain management for members under 21.*