

## Tufts Health Plan Utilization Review Matrix 2024 Musculoskeletal Surgery (Spine)

CERVICAL SPINE SURGERY				
Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<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>Cervical Anterior Decompression (without fusion)</b>	<b>63075</b>	63075, +63076		<p><b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308</p> <p><b>Instrumentation:</b> +22859</p>
<b>Anterior Cervical Decompression with Fusion - Single Level</b>	<b>22551</b>	22548, 22551, 22554	<p><b>Decompression:</b> 63075, +63076</p> <p><b>Removal of Artificial Disc:</b> 22864</p>	<p><b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308</p> <p><b>Instrumentation:</b> +22845, 22853, 22854</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938</p>

## CERVICAL SPINE SURGERY

Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<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>Anterior Cervical Decompression with Fusion - Multiple Levels</b>	<b>22552</b>	+22552, +22585	<p><b>Decompression:</b> 63075, +63076</p> <p><b>Single-Level ACDF:</b> 22548, 22551, 22554</p> <p><b>Removal of Artificial Disc:</b> 22864</p>	<p><b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308</p> <p><b>Instrumentation:</b> +22845, +22846, 22853, 22854</p> <p><b>Bone Grafts:</b> 20930, +20931, +20936, +20937, +20938</p> <p><b>Bone Marrow Aspiration:</b> 20939</p>
<b>Cervical Posterior Decompression (without fusion)</b>	<b>63045</b>	63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051		
<b>Cervical Posterior Decompression with Fusion - Single Level</b>	<b>22600</b>	22590, 22595, 22600	<p><b>Decompression:</b> 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051</p>	<p><b>Instrumentation:</b> +22840, +22841</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937</p>
<b>Cervical Posterior Decompression with Fusion - Multiple Levels</b>	<b>22595</b>	22595, +22614	<p><b>Decompression:</b> 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051</p> <p><b>Single-Level Fusion:</b> 22590, 22595, 22600</p>	<p><b>Instrumentation:</b> +22840, +22841, +22842, +22843, +22844</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937</p>
<b>Cervical Artificial Disc - Single Level</b>	<b>22856</b>	22856, 22861	<p><b>Removal of Artificial Disc:</b> 22864</p>	<p><b>Instrumentation:</b> 22845, 22853</p>

CERVICAL SPINE SURGERY				
Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<p>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>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938</p>
<b>Cervical Artificial Disc - Two Levels</b>	<b>22858</b>	+22858, +0098T, +0095T	<p><b>Single-Level Artificial Disc:</b> 22856, 22861</p> <p><b>Removal of Artificial Disc:</b> 22864</p>	<p><b>Instrumentation:</b> 22845, 22853</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938</p>

LUMBAR SPINE SURGERY				
Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<p>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>
<b>Lumbar Microdiscectomy</b>	<b>63030</b>	62380, 63030, +63035		

LUMBAR SPINE SURGERY				
Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<p>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>	
<b>Lumbar Decompression</b>	<b>63047</b>	63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	<b>Microdiscectomy:</b> 62380, 63030, +63035	
<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
<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
<b>Sacroiliac Joint Fusion<sup>1</sup></b>	<b>27279</b>	27279		

- 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 Evolent (formerly National Imaging Associates, Inc.).
- Evolent 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*