



Wellcare Medicare Connecticut Utilization Review Matrix 2024 Outpatient Interventional Pain Management (IPM)

The matrix below contains all of the CPT 4 codes for which Evolent (formerly National Imaging Associates, Inc.) authorizes on behalf of Wellcare Medicare Connecticut.

Evolent 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, Observation Room, Intraoperatively, or as a Hospital Inpatient are not managed by Evolent.**

| PROCEDURES | | | |
|--|------------------|---|---|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Ancillary Procedures/Codes |
| <p><i>Authorization is provided at the <u>procedure</u> level. There are multiple CPT codes that can be associated with each procedure. These are assumed to be part of the primary request and, when completed in combination, do not require a separate authorization.</i></p> | | | <p><i>These codes do not require prior authorization. If the main procedure is approved, these codes are understood to be included and do not require precertification from the health plan.</i></p> <p><i>*Please note: This is not an all-inclusive list of every possible ancillary code</i></p> |
| Cervical/Thoracic Interlaminar Epidural | 62321 | 62320, 62321 | |
| Cervical/Thoracic Transforaminal Epidural | 64479 | 64479, +64480 | |
| Lumbar/Sacral Interlaminar Epidural | 62323 | 62322, 62323 | |
| Lumbar/Sacral Transforaminal Epidural | 64483 | 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 | |

| PROCEDURES | | | |
|--|------------------|----------------------------|---|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Ancillary Procedures/Codes |
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| Sacroiliac Joint Injection | 27096 | 27096, G0260 | |
| Sympathetic Nerve Block | 64510 | 64510, 64517, 64520, 64530 | 77003 |

- *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.*