



Superior HealthPlan 2024 Utilization Review Matrix Spine Surgery

LUMBAR SPINE SURGERY PROCEDURES					
Procedure Name	Primary CPT Code	Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes	
Authorization is prov each procedure. The do not require a sep	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. *Please note: This is not an all- inclusive list of every possible ancillary code				
Lumbar Microdiscectomy	63030	62380, 63030, +63035			
Lumbar Decompression	63047	63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	Microdiscectomy: 62380, 63030, +63035		
Lumbar Fusion -	1/61/	22533, 22558, 22612, 22630, 22633, +63052, +63053	Microdiscectomy: 62380, 63030, +63035	Instrumentation: +22840, +22841, +22842, +22845, +22853	
Single Level			Decompression: 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	Bone Grafts: +20930, +20931, +20936, +20937, +20938 Bone Marrow Aspiration: 20939	
Lumbar Fusion - Multiple Levels	22614	+22534, +22585, +22614, +22632, +22634, +63052, +63053	Microdiscectomy: 62380, 63030, +63035	Instrumentation: +22840, +22841, +22842, +22845, +22853	

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			Decompression: 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	+20936, +20937, +20938
			Single Level Fusion: 22533, 22558, 22612, 22630, 22633	Bone Marrow Aspiration: 20939
Lumbar Artificial Disc - Single Level	22857	22857, 22862, 22865		
Lumbar Artificial Disc - Multiple Levels	22860	22860, +0164T, +0165T	Single-Level Artificial Disc: 22857, 22862, 22865	
Sacroiliac Joint Fusion	27279	27279		

CERVICAL SPINE SURGERY PROCEDURES				
Procedure Name	Primary CPT Code	Ancillary Procedures/Codes		
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.			These codes do not require prior authorization. If the main procedure is approved, these codes are understood to be included and do not	
each procedure. The	ese are ass	sumed to be part of the primary reque		require presentification from the health

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Cervical ACDF - Anterior Cervical Decompression with Fusion - Single Level	22551	22548, 22551, 22554	Decompression: 63075, +63076 Removal of Artificial Disc: 22864	Vertebral Corpectomy: 63081, +63082, 63300, 63304, +63308 Instrumentation: +22845, 22853, 22854 Bone Grafts: +20930, +20931, +20936, +20937, +20938
Cervical ACDF - Anterior Cervical Decompression with Fusion - Multiple Levels	22552	+22552, +22585	Decompression: 63075, +63076 Single-Level ACDF: 22548, 22551, 22554 Removal of Artificial Disc: 22864	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)	63045	63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051		
Cervical Posterior Decompression with Fusion - Single Level	22600	22590, 22595, 22600	Decompression: 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051	Instrumentation: +22840, +22841 Bone Grafts: +20930, +20931, +20936, +20937
Cervical Posterior Decompression with Fusion - Multiple Levels		22595, +22614	Decompression: 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051 Single-Level Fusion: 22590, 22595, 22600	Instrumentation: +22840, +22841, +22842, +22843, +22844 Bone Grafts: +20930, +20931, +20936, +20937
Cervical Artificial Disc - Single Level	22856	22856, 22861	Removal of Artificial Disc: 22864	Instrumentation: 22845, 22853 Bone Grafts: +20930, +20931, +20936, +20937, +20938
Cervical Artificial Disc - Two Levels	22858	+22858, +0098T, +0095T	Single-Level Artificial Disc: 22856, 22861	Instrumentation: 22845, 22853

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	Removal of Artificial Disc: 22864	Bone Grafts: +20930, +20931, +20936, +20937, +20938
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- 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

