



Surgeries Not Managed by Evolent Provider Tip Sheet

In surgery, the complexity of the coding occasionally creates some confusion due to CPT codes that overlap – the code might be on Evolent's code matrix, but the actual procedure is not covered by our guidelines.

This tip sheet is intended to help identify the procedures that fall outside of the scope of Evolent's guidelines/management.

Urgent surgeries are not managed by Evolent

Evolent only manages non-emergent/elective procedures. The following situations are not elective and generally require urgent surgery. Any prior authorization required would come directly from HMSA.

- Acute trauma/fracture
 - ORIF (open reduction internal fixation)
 - Intramedullary nail/rod
 - o Percutaneous pinning
- Infection
 - I&D (incision & drainage)
 - Debridement
- Cancer
 - Tumor resection

Other common Joint Surgery requests that are not managed by Evolent

The following procedures are not covered by Evolent's guidelines and generally have their own dedicated CPT codes. Providers often bill for an ancillary code that does appear on Evolent's matrix, but when used in conjunction with any of the main surgical procedures below, the request should be sent directly to HMSA.

- Hardware removal
- Bursectomy
- Quadriceps tendon repair
- Patellar tendon repair
- Excision of mass, cyst, etc.
 - Evolent only manages two specific arthroscopic loose body removal codes: 29861 (hip) and 29874 (knee)

Other common Spine Surgery requests that are not managed by Evolent

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Deformity Surgery

Revised: June 2024

• Thoracic Surgery

Procedures considered to be investigational

The following procedures do not have a dedicated CPT code, so they are often billed using another "best fit" code that falls on Evolent's matrix.

- In-office diagnostic arthroscopy (VisionScope, Mi-Eye)
- Ultrasound-guided percutaneous debridement/tenotomy (Tenex)
- Subchondroplasty

Revised: June 2024

- Collagen meniscus implant (Menaflex)
- Thermally-induced capsulorrhaphy

