



Fidelis Care NJ Utilization Review Matrix 2025 Musculoskeletal Surgery (Spine)

| CERVICAL SPINE SURGERY PROCEDURES | | | | |
|--|------------------------|----------------------------|---|--|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Additional Covered Procedures/Codes | 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 require precertification from the health plan. *Please note: This is not an all-inclusive list of every possible ancillary code |
| Cervical Anterior Decompression (without fusion) | 63075 | 63075, +63076 | | Vertebral Corpectomy: 63081, +63082, 63300, 63304, +63308 Instrumentation: +22859 |
| 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 SPINE SURGERY PROCEDURES | | | | |
|--|------------------------|---|---|--|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Additional Covered Procedures/Codes | 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 require precertification from the health plan. *Please note: This is not an all-inclusive list of every possible ancillary code |
| 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 | 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 SPINE SURGERY PROCEDURES | | | | | |
|--|------------------------|----------------------------|---|--|--|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Additional Covered Procedures/Codes | 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 require precertification from the health plan. *Please note: This is not an all-inclusive list of every possible ancillary code | |
| 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 Removal of Artificial Disc: 22864 | Instrumentation: 22845, 22853 Bone Grafts: +20930, +20931, +20936, +20937, +20938 | |

| LUMBAR SPINE SURGERY PROCEDURES | | | | |
|--|------------------------|--|--|--|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Additional Covered Procedures/Codes | 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 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 | |
| | 22612 | 22533, 22558, 22612, 22630, 22633, +63052, +63053 | Microdiscectomy: 62380, 63030, +63035 | Instrumentation: +22840, +22841, +22842, +22845, +22853 |
| Lumbar Fusion - Single Level | | | Decompression: 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057 | Bone Grafts : +20930, +20931, +20936, +20937, +20938 |
| | | | | Bone Marrow Aspiration: 20939 |
| | 22614 | | Microdiscectomy: 62380, 63030, +63035 | Instrumentation: +22840, +22841, +22842, +22845, +22853 |
| Lumbar Fusion - Multiple Levels | | +22534, +22585, +22614, +22632, +22634, +63052, +63053 | Decompression: 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057 | |
| | | | | Bone Grafts : +20930, +20931, +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 SPINE SURGERY PROCEDURES | | | | | |
|--|------------------------|----------------------------|---|--|--|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Additional Covered Procedures/Codes | 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 require precertification from the health plan. *Please note: This is not an all-inclusive list of every possible ancillary code | |
| Lumbar Artificial Disc - Multiple Levels | 22860 | 22860, +0164T, +0165T | Single-Level Artificial Disc: 22857, 22862, 22865 | | |
| Sacroiliac Joint Fusion | 27279 | 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

o Exception: multiple level add-on codes require an authorization for multiple level procedures