Utilization Review Matrix 2025 - HMSA

Spine Surgery

LUMBAR SPINE SURGERY				
Primary Surgery Request	**Primary CPT Code**	**Primary Surgery Allowable Billed Groupings**	**Additional Covered Procedures/Codes**	**Ancillary Procedures/Codes**
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.*				*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.*
Lumbar Microdiscectomy	**63030**	62380, 63030, +63035		
Lumbar Decompression	**63047**	63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	**Microdiscectomy:** 62380, 63030, +63035	
Lumbar Fusion - Single Level	**22612**	22533, 22558, 22612, 22630, 22633, +63052, +63053	**Microdiscectomy:** 62380, 63030, +63035 **Decompression:** 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057	**Instrumentation:** +22840, +22841, +22842, +22845, +22853 **Bone Grafts**: +20930, +20931, +20936, +20937, +20938 **Bone Marrow Aspiration:** 20939

LUMBAR SPINE SURGERY				
Primary Surgery Request	**Primary CPT Code**	**Primary Surgery Allowable Billed Groupings**	**Additional Covered Procedures/Codes**	**Ancillary Procedures/Codes**
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.*				*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.*
Lumbar Fusion - Multiple Levels	**22614**	+22534, +22585, +22614, +22632, +22634, +63052, +63053	**Microdiscectomy:** 62380, 63030, +63035 **Decompression:** 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057 **Single Level Fusion:** 22533, 22558, 22612, 22630, 22633	**Instrumentation**: +22840, +22841, +22842, +22845, +22853 **Bone Grafts**: +20930, +20931, +20936, +20937, +20938 **Bone Marrow Aspiration:** 20939

CERVICAL SPINE SURGERY				
Primary Surgery Request	**Primary CPT Code**	**Primary Surgery Allowable Billed Groupings**	**Additional Covered Procedures/Codes**	**Ancillary Procedures/Codes**
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.*				*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.*
Cervical Anterior Decompression (without fusion)	**63075**	63075, +63076		**Vertebral Corpectomy:** 63081, +63082, 63300, 63304, +63308 **Instrumentation**: +22859
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
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 SPINE SURGERY

Primary Surgery Request	Primary CPT Code	Primary Surgery Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
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.*				*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.*
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 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

- *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.*

- *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*