



**Utilization Review Matrix 2026  
Trillium Health Resources Tailored Plan NC**

**Spine Surgery**

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

## LUMBAR SPINE SURGERY PROCEDURES

Procedure Name	Primary CPT Code	Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<p>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.</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>
Lumbar Fusion - Multiple Levels	22614	+22534, +22585, +22614, +22632, +22634, +63052, +63053	<p><b>Microdiscectomy:</b> 62380, 63030, +63035</p> <p><b>Decompression:</b> 63005, 63012, 63017, 63042, +63044, 63047, +63048, 63056, +63057</p> <p><b>Single Level Fusion:</b> 22533, 22558, 22612, 22630, 22633</p>	<p><b>Instrumentation:</b> +22840, +22841, +22842, +22845, +22853</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938</p> <p><b>Bone Marrow Aspiration:</b> 20939</p>
Lumbar Artificial Disc - Single Level	22857	22857, 22862, 22865		
Lumbar Artificial Disc - Multiple Levels	22860	22860, +0164T, +0165T	<b>Single-Level Artificial Disc:</b> 22857, 22862, 22865	
Sacroiliac Joint Fusion - Percutaneous without Transfixation Device	27278	27278		
Sacroiliac Joint Fusion - Percutaneous	27279	27279		
Sacroiliac Joint Fusion - Open	27280	27280		

## CERVICAL SPINE SURGERY PROCEDURES

Procedure Name	Primary CPT Code	Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<p>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.</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 Anterior Decompression (without fusion)	63075	63075, +63076		<b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308  <b>Instrumentation:</b> +22859
Cervical ACDF - Anterior Cervical Decompression with Fusion - Single Level	22551	22548, 22551, 22554	<b>Decompression:</b> 63075, +63076  <b>Removal of Artificial Disc:</b> 22864	<b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308  <b>Instrumentation:</b> +22845, 22853, 22854  <b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938
Cervical ACDF - Anterior Cervical Decompression with Fusion - Multiple Levels	22552	+22552, +22585	<b>Decompression:</b> 63075, +63076  <b>Single-Level ACDF:</b> 22548, 22551, 22554  <b>Removal of Artificial Disc:</b> 22864	<b>Vertebral Corpectomy:</b> 63081, +63082, 63300, 63304, +63308  <b>Instrumentation:</b> +22845, +22846, 22853, 22854  <b>Bone Grafts:</b> 20930, +20931, +20936, +20937, +20938  <b>Bone Marrow Aspiration:</b> 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	<b>Decompression:</b> 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051	<b>Instrumentation:</b> +22840, +22841  <b>Bone Grafts:</b> +20930, +20931, +20936, +20937

## CERVICAL SPINE SURGERY PROCEDURES

Procedure Name	Primary CPT Code	Allowable Billed Groupings	Additional Covered Procedures/Codes	Ancillary Procedures/Codes
<p>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.</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 Posterior Decompression with Fusion - Multiple Levels	22595	22595, +22614	<p><b>Decompression:</b> 63001, 63015, 63020, +63035, 63040, +63043, 63045, +63048, 63050, 63051</p> <p><b>Single-Level Fusion:</b> 22590, 22595, 22600</p>	<p><b>Instrumentation:</b> +22840, +22841, +22842, +22843, +22844</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937</p>
Cervical Artificial Disc - Single Level	22856	22856, 22861	<p><b>Removal of Artificial Disc:</b> 22864</p>	<p><b>Instrumentation:</b> 22845, 22853</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938</p>
Cervical Artificial Disc - Two Levels	22858	+22858, +0098T, +0095T	<p><b>Single-Level Artificial Disc:</b> 22856, 22861</p> <p><b>Removal of Artificial Disc:</b> 22864</p>	<p><b>Instrumentation:</b> 22845, 22853</p> <p><b>Bone Grafts:</b> +20930, +20931, +20936, +20937, +20938</p>

- **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)..**
- **Evolent does not prior authorize or manage the facility precertification for musculoskeletal surgery services.**

*Note: 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.*