

PAIN MANAGEMENT CODES – PRIOR AUTHORIZATION REQUIRED THROUGH EVICORE HEALTHCARE

The following CPT/HCPCS codes for pain management require prior authorization through eviCore healthcare. In order to request an authorization from eviCore healthcare, please submit your request online, by phone, or by fax to:

- Log onto the [eviCore healthcare Online Web Portal](#). Utilizing the web portal is the quickest, most efficient way to initiate a request.
- Call eviCore healthcare at 888-693-3211.
- Fax an eviCore healthcare Request Form (available online at the eviCore healthcare Online Web Portal) to 844-822-3862.

| CPT®/HCPCS Codes | CPT® / HCPCS Description |
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| 22510 | Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; cervicothoracic |
| 22511 | Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; lumbosacral |
| 22512 | Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; each additional cervicothoracic or lumbosacral vertebral body (List separately in addition to code for primary procedure) |
| 22513 | Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; thoracic |
| 22514 | Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; lumbar |

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| 22515 | Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; each additional thoracic or lumbar vertebral body (List separately in addition to code for primary procedure) |
| 27096 | Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid |
| 62280 | Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; subarachnoid |
| 62281 | Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, cervical or thoracic |
| 62282 | Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal) |
| 62287 | Aspiration or decompression procedure, percutaneous, of nucleus pulposus of intervertebral disk, any method, single or multiple levels, lumbar (eg, manual or |
| 62290 | Injection procedure for discography, each level; lumbar |
| 62291 | Injection procedure for discography, each level; cervical/thoracic |
| 62292 | Injection procedure for chemonucleolysis, including diskography, intervertebral disc, single or multiple levels, lumbar |
| 62320 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance |
| 62321 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT) |
| 62322 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance |
| 62323 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT) |

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| 62324 | Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance |
| 62325 | Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT) |
| 62326 | Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance |
| 62327 | Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT) |
| 62350 | Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; without lamine |
| 62351 | Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; with laminecto |
| 62355 | Removal of previously implanted intrathecal or epidural catheter |
| 62360 | Implantation of device for intrathecal or epidural drug infusion; subcutaneous reservoir |
| 62361 | Implantation of device for intrathecal or epidural drug infusion; non-programmable pump |
| 62362 | Implantation of device for intrathecal or epidural drug infusion; programmable pump, including preparation of pump, with or without programming |
| 63650 | Percutaneous implantation of neurostimulator electrode array, epidural |
| 63655 | Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural |
| 63663 | Revision, including replacement, of spinal neurostimulator electrode percutaneous array(s) |
| 63664 | Revision, including replacement, of spinal neurostimulator electrode plate/paddle(s) |

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| 63685 | Insertion or replacement of spinal neurostimulator pulse generator or receiver |
| 63688 | Revision or removal of implanted spinal neurostimulator pulse generator or receiver |
| 64479 | Injection, anesthetic agent and/or steroid, transforaminal epidural; cervical or thoracic, single level |
| 64480 | Injection, anesthetic agent and/or steroid, transforaminal epidural; cervical or thoracic, each additional level (List separately in addition to code for primary procedure) |
| 64483 | Injection, anesthetic agent and/or steroid, transforaminal epidural; lumbar or sacral, single level |
| 64484 | Injection, anesthetic agent and/or steroid, transforaminal epidural; lumbar or sacral, each additional level (List separately in addition to code for primary procedure) |
| 64490 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level |
| 64491 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; second level (|
| 64492 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; third and any |
| 64493 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level |
| 64494 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level (List separately in addition to code for primary procedure) |
| 64495 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; third and any addi |
| 64510 | Injection, anesthetic agent; stellate ganglion (cervical sympathetic) |
| 64520 | Injection, anesthetic agent; lumbar or thoracic (paravertebral sympathetic) |
| 64633 | Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; cervical or thoracic, single facet joint for the first level performed |
| 64634 | Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; cervical or thoracic, each additional level |

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| 64635 | Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; lumbar or sacral, single facet joint for the first level performed |
| 64636 | Destruction of paravertebral facet joint nerve(s) by neurolytic agent with fluoroscopy or CT image guidance; lumbar or sacral, each additional level |
| 64640 | Destruction by neurolytic agent; other peripheral nerve or branch |
| 72285 | Diskography Cervical/Thoracic RS&I |
| 72295 | Diskography Lumbar RS&I |
| 0213T | Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, cervical or thoracic; single level |
| 0214T | Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, cervical or thoracic; second level (List separately in addition to code for primary procedure) |
| 0215T | Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, cervical or thoracic; third and any additional level(s) (List separately) |
| 0216T | Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, lumbar or sacral; single level |
| 0217T | Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, lumbar or sacral; second level (List separately in addition to code for primary procedure) |
| 0218T | Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with ultrasound guidance, lumbar or sacral; third and any additional level(s) (List separately) |
| 0228T | Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; single level |
| 0229T | Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; each additional level (List separately in addition to code for primary procedure) |
| 0230T | Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; single level |
| 0231T | Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; each additional level (List separately in addition to code for primary procedure) |
| C1767 | Generator, neurostimulator (implantable), nonrechargeable |
| C1778 | Lead, neurostimulator (implantable) |
| C1787 | Patient programmer, neurostimulator |
| C1816 | Receiver and/or transmitter, neurostimulator (implantable) |
| C1820 | Generator, neurostimulator (implantable), with rechargeable battery and charging system |
| C1883 | Adaptor/extension, pacing lead or neurostimulator lead (implantable) |

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| C1897 | Lead, neurostimulator test kit (implantable) |
| L8680 | Implantable neurostimulator electrode, each |
| L8681 | Patient programmer (external) for use with implantable neurostimulator pulse generator, replacement |
| L8682 | Implantable neurostimulator radiofrequency receiver |
| L8683 | Radiofrequency transmitter (external) for use with implantable neurostimulator radiofrequency receiver |
| L8685 | Implantable neurostimulator pulse generator, single array, rechargeable, includes extension |
| L8686 | Implantable neurostimulator pulse generator, single array, nonrechargeable, includes extension |
| L8687 | Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension |
| L8688 | Implantable neurostimulator pulse generator, dual array, nonrechargeable, includes extension |
| L8689 | External recharging system for battery (internal) for use with implant neurostimulator, replacement |