

Operations Bulletin – July 28, 2023

Prior authorization for MSK, cardiology and pain management services will transition from HealthHelp to Cohere for all your Geisinger Health Plan patients

We've joined forces with Cohere Health to bring you a better way to request prior authorization for musculoskeletal (MSK), cardiology and interventional pain management services starting Oct. 1, 2023.

Some additional authorization requirements will also be added to coincide with the switch to Cohere.

Cohere is already being used for most other outpatient services, bringing a better way to request prior authorization to much of the Geisinger Health Plan network. The response has been resoundingly positive! On Aug. 28, 2023, inpatient prior authorization will also be available through Cohere. Then on Oct. 1, 2023, prior authorization requests for MSK, cardiology and interventional pain management services that currently go through HealthHelp will transition to the Cohere portal.

After Oct. 1, 2023, all services, except high end diagnostic imaging (radiology) services, that require Geisinger Health Plan prior authorization will be submitted through Cohere.

If you or your organization provide any MSK, cardiology and interventional pain management services for Geisinger Health Plan members, the prior authorization changes coming this October will affect you.

Here's what you need to know.

Beginning Oct. 1, 2023:

- You'll no longer be able to request prior authorization for MSK, cardiology and interventional pain management services through HealthHelp.
- You'll be able to request all prior authorization for MSK, cardiology and interventional pain management services through Cohere.
- You'll benefit from a streamlined and collaborative online authorization experience – better than phone and fax – that offers evidence-based care suggestions.
- The procedure codes listed below will require prior authorization (in addition to MSK, cardiology and interventional pain management services that currently require prior authorization). Prior authorization will be needed for these additional services to pay.
- These authorization requirements will apply to all your Geisinger Health Plan patients.

- Geisinger Health Plan Medical Management will still review requests and retain ultimate authority over medical necessity determinations.
- Check our [prior authorization list](#) frequently so you always know which services require authorization submission through Cohere.

What you should do to prepare

- Reduce your administrative burden – register with Cohere and become familiar with Cohere’s online authorization portal before October.
- Review the list of procedure codes below to know what additional MSK, cardiology and interventional pain management services need authorization through Cohere.
- Expect Cohere to reach out to you directly – keep an eye out and be sure your staff is alerted to messages from Cohere.
- Know that “prior authorization” may often be referred to as “preauthorization” by Cohere.
- Take advantage of learning opportunities like Geisinger Health Plan town halls, Cohere webinars and Cohere’s user-friendly online learning center.

About Cohere

Cohere Health is a digital intelligence company that’s transforming utilization management by aligning physicians and health plans on evidence-based care paths for the patient's entire care journey. By integrating these care paths into the prior authorization submission process, Cohere's digital UM collaboration platform reduces denial rates and medical expenses while improving patient outcomes. Cohere serves over 5 million members nationally, in every community around the county, in every practice setting. Cohere uses technology to auto-approve clinically optimal care for members.

How Cohere makes prior authorization easy

Cohere’s online portal is an easy way to get authorization requests reviewed and approved quickly so your patients can get the care they need. Cohere uses a team of nurses and doctors to make sure guidance during the request process is medically appropriate and meets clinical guidelines.

Here’s what happens when you submit precertification requests online through Cohere:

1. Cohere’s real-time consultative request process efficiently guides you through each step, providing you with patient-specific suggestions that can expedite approval.
2. Your request is immediately relayed to Geisinger Health Plan Medical Management for review. Geisinger Health Plan Medical Management will make a determination.
3. Upon approval you will see the authorization number populate in the portal.

Cohere makes checking authorization status easy too. When a request has received a final determination (approved, partially approved, or denied) Cohere will send the submitter an email notification with this information.

Cohere offers useful options for status checks either through the online portal or an authorization check page for those without portal access. Using Cohere’s online portal is the best way for you and your practice to manage authorization requests. However, offline options for obtaining approval will remain after Oct. 1, 2023, so that patient care is not hindered when a provider cannot connect to the web.

Learn more

Save valuable time and be ready to serve your Geisinger Health Plan patients in 2023.

- Look for upcoming Geisinger Health Plan and Cohere virtual town halls through MS Teams.
- Join us for introductory virtual town halls through one of the links below:
 - [Wednesday, Aug. 30, 2023 at 11:00 a.m. EST](#)
 - [Monday, Sep. 11, 2023 at 11:00 a.m. EST](#)
- Attend [Cohere training webinars](#), including 1 on 1 office hours to walk you through registration.
- Visit the [Cohere Learning Center](#) to learn at your own pace and view detailed user guides.

Register today!

Visit Cohere online and [register with Cohere](#) today! You'll need to be registered before Oct. 1, 2023. If you have any questions about registration, you can connect with a Cohere representative through the in-app chat directly on the registration page.

Contact us

Your Geisinger Health Plan account manager and Cohere representatives are here to help. Contact your account manager at **800-876-5357** or GHPAccountMngt@geisinger.edu.

Services that will require authorization

As of **Oct. 1, 2023**, the procedure codes listed below will require prior authorization through Cohere. Note that the procedure codes listed below do not include procedures that currently require prior authorization through Geisinger Health Plan.

Refer to [Geisinger Health Plan's prior authorization list](#) for current prior authorization requirements.

MSK, cardiology and interventional pain management services ordered before Oct. 1, 2023, do not need prior authorization through Cohere and should follow the existing prior authorization process through HealthHelp, if applicable.

All MSK, cardiology and interventional pain management procedures that require prior authorization, including those identified below, will need to be requested through Cohere beginning Oct. 1, 2023, for your claims process and pay correctly.

Issuance of an approval decision for any prior authorization request does not represent a guarantee of payment. You can find the prior authorization list, coverage policies, and related plan policies on [NaviNet](#) or in the *For providers* section of our website under [Clinical policies](#).

This Operations Bulletin and the information contained herein amend the GHP Participating Provider Guide, effective Oct. 1, 2023.

New MSK, cardiology and interventional pain management procedure and revenue codes requiring prior authorization effective Oct. 1, 2023

Code	CPT Code Description	Current/New Category
37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty	New Cardiovascular Category/Revascularization
37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	New Cardiovascular Category/Revascularization
0238T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; iliac artery, each vessel	New Cardiovascular Category/Revascularization
37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty	New Cardiovascular Category/Revascularization
37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed	New Cardiovascular Category/Revascularization
37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	New Cardiovascular Category/Revascularization
37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	New Cardiovascular Category/Revascularization
37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty	New Cardiovascular Category/Revascularization
37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed	New Cardiovascular Category/Revascularization
37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	New Cardiovascular Category/Revascularization
37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	New Cardiovascular Category/Revascularization
92924	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; single major coronary artery or branch	New Cardiovascular Category/Revascularization
92933	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; single major coronary artery or branch	New Cardiovascular Category/Revascularization
64625	Radiofrequency ablation, nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)	Add to Current Category-Interventional Pain Management
64624	Destruction by neurolytic agent, genicular nerve branches including imaging guidance, when performed	Add to Current Category-Interventional Pain Management
64454	Injection(s), anesthetic agent(s) and/or steroid; genicular nerve branches, including imaging guidance, when performed	Add to Current Category-Interventional Pain Management
27700	Arthroplasty, ankle	New MSK Category/Ankle
27702	Arthroplasty, ankle; with implant (total ankle)	New MSK Category/Ankle

27870	Arthrodesis, ankle, open	New MSK Category/Ankle
22100	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; cervical	Add to Current MSK-Spine Category
22101	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; thoracic	Add to Current MSK-Spine Category
22102	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; lumbar	Add to Current MSK-Spine Category
22103	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; each additional segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22116	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; each additional vertebral segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
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)	Add to Current MSK-Spine Category
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)	Add to Current MSK-Spine Category
22526	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; single level	Add to Current MSK-Spine Category
22527	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; 1 or more additional levels (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22534	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic or lumbar, each additional vertebral segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22552	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophylectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace (List separately in addition to code for separate procedure)	Add to Current MSK-Spine Category
22585	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); each additional interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22586	Arthrodesis, pre-sacral interbody technique, including disc space preparation, discectomy, with posterior instrumentation, with image guidance, includes bone graft when performed, L5-S1 interspace	Add to Current MSK-Spine Category
22614	Arthrodesis, posterior or posterolateral technique, single interspace; each additional interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22632	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace, lumbar; each additional interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category

22634	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace, lumbar; each additional interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22830	Exploration of spinal fusion	Add to Current MSK-Spine Category
22840	Posterior non-segmental instrumentation (eg, Harrington rod technique, pedicle fixation across 1 interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation) (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22841	Internal spinal fixation by wiring of spinous processes (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22842	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 3 to 6 vertebral segments (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22843	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 7 to 12 vertebral segments (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22844	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 13 or more vertebral segments (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22845	Anterior instrumentation; 2 to 3 vertebral segments (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22846	Anterior instrumentation; 4 to 7 vertebral segments (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22847	Anterior instrumentation; 8 or more vertebral segments (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22848	Pelvic fixation (attachment of caudal end of instrumentation to pelvic bony structures) other than sacrum (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22853	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22854	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to vertebral corpectomy(ies) (vertebral body resection, partial or complete) defect, in conjunction with interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22858	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophyctomy for nerve root or spinal cord decompression and microdissection); second level, cervical (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22859	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh, methylmethacrylate) to intervertebral disc space or vertebral body defect without interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
22862	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; lumbar	Add to Current MSK-Spine Category
22868	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; second level (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category

22870	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; second level (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
29826	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with coracoacromial ligament (ie, arch) release, when performed (List separately in addition to code for primary procedure)	Add to Current MSK-Shoulder Category
29850	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; without internal or external fixation (includes arthroscopy)	Add to Current MSK-Knee Category
29851	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; with internal or external fixation (includes arthroscopy)	Add to Current MSK-Knee Category
33289	Transcatheter implantation of wireless pulmonary artery pressure sensor for long-term hemodynamic monitoring, including deployment and calibration of the sensor, right heart catheterization, selective pulmonary catheterization, radiological supervision and interpretation, and pulmonary artery angiography, when performed	Add to Current Cardiology-Cardiovascular Devices-Loop Recorder Category
33875	Descending thoracic aorta graft, with or without bypass	New Cardiovascular Category/Aortic Repair
33877	Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass	New Cardiovascular Category/Aortic Repair
33880	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin	New Cardiovascular Category/Aortic Repair
33881	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin	New Cardiovascular Category/Aortic Repair
33883	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); initial extension	New Cardiovascular Category/Aortic Repair
33886	Placement of distal extension prosthesis(s) delayed after endovascular repair of descending thoracic aorta	New Cardiovascular Category/Aortic Repair
34701	Endovascular repair of infrarenal aorta by deployment of an aorto-aortic tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the aortic bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	New Cardiovascular Category/Aortic Repair
34702	Endovascular repair of infrarenal aorta by deployment of an aorto-aortic tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the aortic bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	New Cardiovascular Category/Aortic Repair

34703	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-uni-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	New Cardiovascular Category/Aortic Repair
34704	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-uni-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	New Cardiovascular Category/Aortic Repair
34705	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	New Cardiovascular Category/Aortic Repair
34706	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	New Cardiovascular Category/Aortic Repair
34830	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; tube prosthesis	New Cardiovascular Category/Aortic Repair
34831	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bi-iliac prosthesis	New Cardiovascular Category/Aortic Repair
34832	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bifemoral prosthesis	New Cardiovascular Category/Aortic Repair
34841	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)	New Cardiovascular Category/Aortic Repair
34842	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	New Cardiovascular Category/Aortic Repair

34843	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprosthesis (superior mesenteric, celiac and/or renal artery[s])	New Cardiovascular Category/Aortic Repair
34844	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprosthesis (superior mesenteric, celiac and/or renal artery[s])	New Cardiovascular Category/Aortic Repair
34845	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)	New Cardiovascular Category/Aortic Repair
34846	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprosthesis (superior mesenteric, celiac and/or renal artery[s])	New Cardiovascular Category/Aortic Repair
34847	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprosthesis (superior mesenteric, celiac and/or renal artery[s])	New Cardiovascular Category/Aortic Repair
34848	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprosthesis (superior mesenteric, celiac and/or renal artery[s])	New Cardiovascular Category/Aortic Repair
35301	Thromboendarterectomy, including patch graft, if performed; carotid, vertebral, subclavian, by neck incision	New Cardiovascular Category/Aortic Repair
36245	Selective catheter placement, arterial system; each first order abdominal, pelvic, or lower extremity artery branch, within a vascular family	New Cardiovascular Category/Aortic Repair
36246	Selective catheter placement, arterial system; initial second order abdominal, pelvic, or lower extremity artery branch, within a vascular family	New Cardiovascular Category/Aortic Repair
36247	Selective catheter placement, arterial system; initial third order or more selective abdominal, pelvic, or lower extremity artery branch, within a vascular family	New Cardiovascular Category/Aortic Repair
37215	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; with distal embolic protection	New Cardiovascular Category/Aortic Repair
37216	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; without distal embolic protection	New Cardiovascular Category/Aortic Repair

37217	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery by retrograde treatment, open ipsilateral cervical carotid artery exposure, including angioplasty, when performed, and radiological supervision and interpretation	New Cardiovascular Category/Aortic Repair
37218	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery, open or percutaneous antegrade approach, including angioplasty, when performed, and radiological supervision and interpretation	New Cardiovascular Category/Aortic Repair
62287	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, any method utilizing needle based technique to remove disc material under fluoroscopic imaging or other form of indirect visualization, with discography and/or epidural injection(s) at the treated level(s), when performed, single or multiple levels, lumbar	Add to Current MSK-Spine Category
63035	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; each additional interspace, cervical or lumbar (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63043	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional cervical interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63044	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional lumbar interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63048	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; each additional vertebral segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63052	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; single vertebral segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63053	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; each additional vertebral segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63057	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; each additional segment, thoracic or lumbar (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63066	Costovertebral approach with decompression of spinal cord or nerve root(s) (eg, herniated intervertebral disc), thoracic; each additional segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63076	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophylectomy; cervical, each additional interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63078	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophylectomy; thoracic, each additional interspace (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category

63082	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, each additional segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63086	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, each additional segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63088	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; each additional segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63091	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; each additional segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63101	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic, single segment	Add to Current MSK-Spine Category
63102	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); lumbar, single segment	Add to Current MSK-Spine Category
63103	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic or lumbar, each additional segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63170	Laminectomy with myelotomy (eg, Bischof or DREZ type), cervical, thoracic, or thoracolumbar	Add to Current MSK-Spine Category
63172	Laminectomy with drainage of intramedullary cyst/syrinx; to subarachnoid space	Add to Current MSK-Spine Category
63173	Laminectomy with drainage of intramedullary cyst/syrinx; to peritoneal or pleural space	Add to Current MSK-Spine Category
63265	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; cervical	Add to Current MSK-Spine Category
63266	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; thoracic	Add to Current MSK-Spine Category
63267	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; lumbar	Add to Current MSK-Spine Category
63268	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; sacral	Add to Current MSK-Spine Category
63270	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; cervical	Add to Current MSK-Spine Category
63271	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; thoracic	Add to Current MSK-Spine Category
63272	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; lumbar	Add to Current MSK-Spine Category
63273	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; sacral	Add to Current MSK-Spine Category
63275	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, cervical	Add to Current MSK-Spine Category

63276	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, thoracic	Add to Current MSK-Spine Category
63277	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, lumbar	Add to Current MSK-Spine Category
63278	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, sacral	Add to Current MSK-Spine Category
63280	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, cervical	Add to Current MSK-Spine Category
63281	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, thoracic	Add to Current MSK-Spine Category
63282	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, lumbar	Add to Current MSK-Spine Category
63283	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, sacra	Add to Current MSK-Spine Category
63285	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, cervical	Add to Current MSK-Spine Category
63286	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracic	Add to Current MSK-Spine Category
63287	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracolumbar	Add to Current MSK-Spine Category
63290	Laminectomy for biopsy/excision of intraspinal neoplasm; combined extradural-intradural lesion, any level	Add to Current MSK-Spine Category
63295	Osteoplastic reconstruction of dorsal spinal elements, following primary intraspinal procedure (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
63308	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; each additional segment (List separately in addition to codes for single segment)	Add to Current MSK-Spine Category
63663	Revision including replacement, when performed, of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	Add to Current Category-Interventional Pain Management
63664	Revision including replacement, when performed, of spinal neurostimulator electrode plate/paddle(s) placed via laminotomy or laminectomy, including fluoroscopy, when performed	Add to Current Category-Interventional Pain Management
63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver	Add to Current Category-Interventional Pain Management
64628	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral	Add to Current MSK-Spine Category
64629	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
93264	Remote monitoring of a wireless pulmonary artery pressure sensor for up to 30 days, including at least weekly downloads of pulmonary artery pressure recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional	Add to Current Category Cardiology-Cardiac Devices- Mobile Cardiovascular Telemetry
0095T	Removal of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
0098T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
0164T	Removal of total disc arthroplasty, (artificial disc), anterior approach, each additional interspace, lumbar (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category

0165T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, lumbar (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
0222T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; each additional vertebral segment (List separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
0505T	Endovenous femoral-popliteal arterial revascularization, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated radiological supervision and interpretation, when performed, with crossing of the occlusive lesion in an extraluminal fashion	New Cardiovascular Category/Revascularization
0656T	Vertebral body tethering, anterior; up to 7 vertebral segments	Add to Current MSK-Spine Category
0657T	Vertebral body tethering, anterior; 8 or more vertebral segments	Add to Current MSK-Spine Category
S2300	Arthroscopy, shoulder, surgical; with thermally-induced capsulorrhaphy	Add to Current MSK-Shoulder Category
S2348	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, using radiofrequency energy, single or multiple levels, lumbar	Add to Current MSK-Spine Category
S2350	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophyctomy; lumbar, single interspace	Add to Current MSK-Spine Category
S2351	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophyctomy; lumbar, each additional interspace (list separately in addition to code for primary procedure)	Add to Current MSK-Spine Category
0707T	Injection(s), bone substitute material (eg, calcium phosphate) into subchondral bone defect (ie, bone marrow lesion, bone bruise, stress injury, microtrabecular fracture), including imaging guidance and arthroscopic assistance for joint visualization	Add to Current MSK Categories-Hip, Knee, and Shoulder
0737T	Xenograft implantation into the articular surface	Add to Current MSK Categories-Hip, Knee, and Shoulder
64628	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral	Add to Current MSK-Spine Category
64629	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral	Add to Current MSK-Spine Category
0795T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; complete system (ie, right atrial and right ventricular pacemaker components)	Add to Current Cardiology-Cardiac Devices-Pacemaker Category

0796T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right atrial pacemaker component (when an existing right ventricular single leadless pacemaker exists to create a dual-chamber leadless pacemaker system)	Add to Current Cardiology-Cardiac Devices-Pacemaker Category
0797T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	Add to Current Cardiology-Cardiac Devices-Pacemaker Category
0798T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; complete system (ie, right atrial and right ventricular pacemaker components)	Add to Current Cardiology-Cardiac Devices-Pacemaker Category
0799T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; right atrial pacemaker component	Add to Current Cardiology-Cardiac Devices-Pacemaker Category
0800T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	Add to Current Cardiology-Cardiac Devices-Pacemaker Category
0801T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; dual-chamber system (ie, right atrial and right ventricular pacemaker components)	Add to Current Cardiology-Cardiac Devices-Pacemaker Category
0802T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right atrial pacemaker component	Add to Current Cardiology-Cardiac Devices-Pacemaker Category
0803T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	Add to Current Cardiology-Cardiac Devices-Pacemaker Category

Some plans (e.g., PEBTF and GHP Kids (CHIP)) have additional prior authorization requirements.

Refer to [Geisinger Health Plan's prior authorization list](#) for current prior authorization requirements

Geisinger Health Plan may refer collectively to health care coverage sponsors Geisinger Health Plan, Geisinger Quality Options, Inc., and Geisinger Indemnity Insurance Company, unless otherwise noted. Geisinger Health Plan is part of Geisinger, an integrated health care delivery and coverage organization.