



MVP Health Care Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
CID	33206	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial	No	No
CID	33207	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); ventricular	No	No
CID	33208	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular	No	No
CID	33212	Insertion of pacemaker pulse generator only; with existing single lead	No	No
CID	33213	Insertion of pacemaker pulse generator only; with existing dual leads	No	No
CID	33214	Upgrade of implanted pacemaker system, conversion of single chamber system to dual chamber system (includes removal of previously placed pulse generator, testing of existing lead, insertion of new lead, insertion of new generator)	No	No
CID	33221	Insertion of pacemaker pulse generator only; with existing multiple leads	No	No
CID	33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or pacing cardioverter-defibrillator pulse generator (including revision of pocket, removal, insertion, and/or replacement of existing generator)	No	No
CID	33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of pacing cardioverter-defibrillator or pacemaker pulse generator (including upgrade to dual chamber system and pocket revision) (list separately in addition to code for primary procedure)	No	No
CID	33227	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; single lead system	No	No
CID	33228	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; dual lead system	No	No
CID	33229	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; multiple lead system	No	No
CID	33230	Insertion of pacing cardioverter-defibrillator pulse generator only; with existing dual leads	No	No
CID	33231	Insertion of pacing cardioverter-defibrillator pulse generator only; with existing multiple leads	No	No
CID	33240	Insertion of pacing cardioverter-defibrillator pulse generator only; with existing single lead	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

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CID	33249	Insertion or replacement of permanent pacing cardioverter-defibrillator system with transvenous lead(s), single or dual chamber	No	No
CID	33262	Removal of pacing cardioverter-defibrillator pulse generator with replacement of pacing cardioverter-defibrillator pulse generator; single lead system	No	No
CID	33263	Removal of pacing cardioverter-defibrillator pulse generator with replacement of pacing cardioverter-defibrillator pulse generator; dual lead system	No	No
CID	33264	Removal of pacing cardioverter-defibrillator pulse generator with replacement of pacing cardioverter-defibrillator pulse generator; multiple lead system	No	No
CID	33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed	No	No
CID	33274	Transcatheter insertion or replacement of permanent leadless pacemaker, right ventricular, including imaging guidance (eg, fluoroscopy, venous ultrasound, ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed	No	No
CID	33275	Transcatheter removal of permanent leadless pacemaker, right ventricular	No	No
CID	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	No	No
CID	33477	Implantation of heart valve (pulmonary) to lungs, accessed through the skin	No	No
MRI	70336	M R I T M J	Yes	Yes
CT	70450	C T Head Without Contrast	Yes	Yes
CT	70460	C T Head With Contrast	Yes	Yes
CT	70470	C T Head Without & With Contrast	Yes	Yes
CT	70480	C T Orbit Without Contrast	Yes	Yes
CT	70481	C T Orbit With Contrast	Yes	Yes
CT	70482	C T Orbit Without & With Contrast	Yes	Yes
CT	70486	C T Maxillofacial Without Contrast	Yes	Yes



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CT	70487	C T Maxillofacial With Contrast	Yes	Yes
CT	70488	C T Maxillofacial Without & With Contrast	Yes	Yes
CT	70490	C T Soft Tissue Neck Without Contrast	Yes	Yes
CT	70491	C T Soft Tissue Neck With Contrast	Yes	Yes
CT	70492	C T Soft Tissue Neck Without & With Contrast	Yes	Yes
CT	70496	C T Angiography Head	Yes	Yes
CT	70498	C T Angiography Neck	Yes	Yes
MRI	70540	M R I Orbit, Face,Neck and/or Without Contrast	Yes	Yes
MRI	70542	M R I Face, Orbit, Neck With Contrast	Yes	Yes
MRI	70543	M R I Face, Orbit, Neck With & Without Contrast	Yes	Yes
MRA	70544	M R A Head Without Contrast	Yes	Yes
MRA	70545	M R A Head With Contrast	Yes	Yes
MRA	70546	M R A Head With & Without Contrast	Yes	Yes
MRA	70547	M R A Neck Without Contrast	Yes	Yes
MRA	70548	M R A Neck With Contrast	Yes	Yes
MRA	70549	M R A Neck With & Without Contrast	Yes	Yes
MRI	70551	M R I Head Without Contrast	Yes	Yes
MRI	70552	M R I Head With Contrast	Yes	Yes
MRI	70553	M R I Head With & Without Contrast	Yes	Yes
MRI	70554	MRI Brain, functional MRI	Yes	Yes
MRI	70555	MRI Brain, functional MRI, requiring physician	Yes	Yes
CT	71250	C T Thorax, Diagnostic; Without Contrast Material	Yes	Yes
CT	71260	C T Thorax, Diagnostic; With Contrast Material(s)	Yes	Yes
CT	71270	C T Thorax, Diagnostic; Without Contrast Material, Followed By Contrast Material(s) And Further Sections	Yes	Yes
CT	71271	Computed Tomography, Thorax, Low Dose For Lung Cancer Screening, Without Contrast Material(S) - Effective Date 03.01.21	Yes	Yes
CT	71275	C T Angiography Chest Without Contrast Material, Followed by Contrast Material and Further Sections,Including Image Postprocessing	Yes	Yes
MRI	71550	M R I Chest Without Contrast	Yes	Yes



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MRI	71551	M R I Chest With Contrast	Yes	Yes
MRI	71552	M R I Chest With & Without Contrast	Yes	Yes
MRA	71555	M R A Chest (Excluding Myocardium) With Or Without Contrast	Yes	Yes
CT	72125	C T Cervical Spine Without Contrast	Yes	Yes
CT	72126	C T Cervical Spine With Contrast	Yes	Yes
CT	72127	C T Cervical Spine Without & With Contrast	Yes	Yes
CT	72128	C T Thoracic Spine Without Contrast	Yes	Yes
CT	72129	C T Thoracic Spine With Contrast	Yes	Yes
CT	72130	C T Thoracic Spine Without & With Contrast	Yes	Yes
CT	72131	C T Lumbar Spine Without Contrast	Yes	Yes
CT	72132	C T Lumbar Spine With Contrast	Yes	Yes
CT	72133	C T Lumbar Spine Without & With Contrast	Yes	Yes
MRI	72141	M R I Cervical Spine Without Contrast	Yes	Yes
MRI	72142	M R I Cervical Spine With Contrast	Yes	Yes
MRI	72146	M R I Thoracic Spine Without Contrast	Yes	Yes
MRI	72147	M R I Thoracic Spine With Contrast	Yes	Yes
MRI	72148	M R I Lumbar Spine Without Contrast	Yes	Yes
MRI	72149	M R I Lumbar Spine With Contrast	Yes	Yes
MRI	72156	M R I Cervical Spine With & Without Contrast	Yes	Yes
MRI	72157	M R I Thoracic Spine With & Without Contrast	Yes	Yes
MRI	72158	M R I Lumbar Spine With & Without Contrast	Yes	Yes
MRA	72159	M R A Spinal Canal With Or Without Contrast	Yes	Not Covered
CT	72191	C T Angiography Pelvis	Yes	Yes
CT	72192	C T Pelvis Without Contrast	Yes	Yes
CT	72193	C T Pelvis With Contrast	Yes	Yes
CT	72194	C T Pelvis Without & With Contrast	Yes	Yes
MRI	72195	M R I Pelvis Without Contrast	Yes	Yes
MRI	72196	M R I Pelvis With Contrast	Yes	Yes
MRI	72197	M R I Pelvis With & Without Contrast	Yes	Yes



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MRA	72198	M R A Pelvis With Or Without Contrast	Yes	Yes
CT	73200	C T Upper Extremity Without Contrast	Yes	Yes
CT	73201	C T Upper Extremity With Contrast	Yes	Yes
CT	73202	C T Upper Extremity Without & With Contrast	Yes	Yes
CT	73206	C T Angiography Upper Extremity	Yes	Yes
MRI	73218	M R I Upper Extremity Without Contrast	Yes	Yes
MRI	73219	M R I Upper Extremity With Contrast	Yes	Yes
MRI	73220	M R I Upper Extremity With & Without Contrast	Yes	Yes
MRI	73221	M R I Upper Extremity Joint Without Contrast	Yes	Yes
MRI	73222	M R I Upper Extremity Joint With Contrast	Yes	Yes
MRI	73223	M R I Upper Extremity Joint With & Without Contrast	Yes	Yes
MRA	73225	M R A Upper Extremity With Or Without Contrast	Yes	Not Covered
CT	73700	C T Lower Extremity Without Contrast	Yes	Yes
CT	73701	C T Lower Extremity With Contrast	Yes	Yes
CT	73702	C T Lower Extremity Without & With Contrast	Yes	Yes
CT	73706	C T Angiography Lower Extremity	Yes	Yes
MRI	73718	M R I Lower Extremity Without Contrast	Yes	Yes
MRI	73719	M R I Lower Extremity With Contrast	Yes	Yes
MRI	73720	M R I Lower Extremity With & Without Contrast	Yes	Yes
MRI	73721	M R I Lower Extremity Joint Without Contrast	Yes	Yes
MRI	73722	M R I Lower Extremity Joint With Contrast	Yes	Yes
MRI	73723	M R I Lower Extremity Joint With & Without Contrast	Yes	Yes
MRA	73725	M R A Lower Extremity With Or Without Contrast	Yes	Yes
CT	74150	C T Abdomen Without Contrast	Yes	Yes
CT	74160	C T Abdomen With Contrast	Yes	Yes
CT	74170	C T Abdomen Without & With Contrast	Yes	Yes
CT	74174	CT angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	Yes
CT	74175	C T Angiography Abdomen	Yes	Yes



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CT	74176	C T Abdomen And Pelvis Without Contrast	Yes	Yes
CT	74177	CT Abdomen And Pelvis With Contrast	Yes	Yes
CT	74178	Computed Tomography, Abdomen And Pelvis; Without Contrast Material In One Or Both Body Regions, Followed By Contrast Material(S) And Further Sections In One Or Both Body Regions	Yes	Yes
MRI	74181	M R I Abdomen Without Contrast	Yes	Yes
MRI	74182	M R I Abdomen With Contrast	Yes	Yes
MRI	74183	M R I Abdomen With & Without Contrast	Yes	Yes
MRA	74185	M R A Abdomen With Or Without Contrast	Yes	Yes
CT	74261	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	Yes	Yes
CT	74262	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; with contrast material(s) including non-contrast images, if performed	Yes	Yes
CT	74263	Computed tomographic (CT) colonography, screening, including image postprocessing	I/E	I/E
MRI	74712	Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single or first gestation	Yes	Yes
MRI	74713	Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; each additional gestation (List separately in addition to code for primary procedure)	Yes	Yes
CMRI	75557	Cardiac magnetic resonance imaging for morphology and function without contrast material	Yes	Yes
CMRI	75559	Cardiac magnetic resonance imaging for morphology and function without contrast material; with stress imaging	Yes	Yes
CMRI	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences	Yes	Yes
CMRI	75563	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences; with stress imaging	Yes	Yes
CMRI	75565	Cardiac magnetic resonance imaging for velocity flow mapping (list separately in addition to code for primary procedure)	Yes	Yes



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CCTA	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Yes	Yes
CCTA	75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3d image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	Yes	Yes
CCTA	75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of left ventricular [LV] cardiac function, right ventricular [RV] structure and function and evaluation of vascular structures, if performed)	Yes	Yes
CCTA	75574	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3d image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)	Yes	Yes
CCTA	75580	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional	Yes	Yes
CT	75635	C T Angiography Abdominal Aorta	Yes	Yes
3DI	76376	3D Rendering W/O Postprocessing	Yes	Yes
3DI	76377	3D Rendering W Postprocessing	Yes	Yes
CT	76380	C T Limited Or Localized Follow-Up Study	Yes	Yes
MRI	76390	M R I Spectroscopy	I/E	I/E
MRI	76391	Magnetic resonance (eg, vibration) elastography	Yes	Yes
CT	76497	Unlisted computed tomography procedure	Redirect to valid code	Redirect to valid code
MRI	76498	Unlisted MRI Procedure	Redirect to valid code	Redirect to valid code
MRI	76499	Unlisted Radiology Procedure	No	No
DGUS	76506	Us Echoencephalography	No	No
DGUS	76536	Us Soft Tissue Head And Neck	No	No



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DGUS	76604	Us Chest Real Time With Image Documentation	No	No
DGUS	76641	Ultrasound, breast, unilateral, real time with image documentation, including axilla when performed; complete	No	No
DGUS	76642	Ultrasound, breast, unilateral, real time with image documentation, including axilla when performed; limited	No	No
DGUS	76700	Ultrasound Abdominal Real Time With Image Documentation	No	No
DGUS	76705	U/S Single Organ	No	No
DGUS	76706	Ultrasound, Abdominal Aorta, Real Time With Image Documentation, Screening Study For Abdominal Aortic Aneurysm (AAA)	No	No
DGUS	76770	Ultrasound,Retroperotonal,Real Time With Image Documentation;Complete	No	No
DGUS	76775	Us Echo Limited	No	No
DGUS	76776	Ultrasound, Transplanted Kidney, Real Time And Duplex Doppler With Image Documentation	No	No
DGUS	76800	Us Echo Spinal Canal	No	No
OB-US	76801	Ultrasound Obstetrical Pelvis, Pregnant Uterus, First Trimester less than 14 Weeks Single Or First Gestation	No	No
OB-US	76802	Ultrasound Obstetrical Pelvis, Pregnant Uterus, First Trimester less than 14 Weeks Each Additional Gestation	No	No
OB-US	76805	Ultrasound Obstetrical Pelvis, Pregnant Uterus, First Trimester less than 14 Weeks Each Additional Gestation	No	No
OB-US	76810	Ultrasound Obstetrical Pelvis Complete, Multiple Gestation After 1st Trimester	No	No
OB-US	76811	Ultrasound Pregnant Uterus Fetal & Maternal Evaluation Plus Fetal Anatomic Evaluation Transabdominal Single Or First Gestation	No	No
OB-US	76812	Ultrasound Pregnant Uterus Fetal & Maternal Evaluation Plus Fetal Anatomic Evaluation Transabdominal Each Additional Gestation	No	No
OB-US	76813	Ultrasound, pregnant uterus, real time with image documentation	No	No
OB-US	76814	Ultrasound, pregnant uterus, real time with image documentation	No	No
OB-US	76815	Ultrasound Obstetrical Pelvis Limited (Gestational Age, Heart Beat, Emergency)	No	No
OB-US	76816	Ultrasound Obstetrical Pelvis Follow Up Or Repeat	No	No
OB-US	76817	Ultrasound Pregnant Uterus Transvaginal	No	No



MVP Health Care Prior Authorization Procedure List: Radiology

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OB-US	76818	Fetal Biophysical Profile	No	No
OB-US	76819	Fetal Biophysical Profile Without Stress Non Stress	No	No
OB-US	76820	Doppler Velocimetry, Fetal; Umbilical Artery	No	No
OB-US	76821	Doppler Velocimetry, Fetal; Middle Cerebral Artery	No	No
OB-US	76825	Ultrasound Obstetrical Echocardiography, Fetal, Cardiovascular System	No	No
OB-US	76826	Follow Up Or Repeat Study	No	No
OB-US	76827	Doppler Echocardiography Fetal Complete	No	No
OB-US	76828	Follow Up Or Repeat Study	No	No
DGUS	76830	U/S Transvaginal	No	No
DGUS	76831	Hysterosonography W Or W/O Col	No	No
DGUS	76856	Ultrasound Pelvic Real Time With Image Documentation;Complete	No	No
DGUS	76857	Us Pel Lim Or F/U	No	No
DGUS	76870	Us Echo Scrotum	No	No
DGUS	76872	U/S Transrectal	No	No
DGUS	76885	Us Echo, Infant Hips Realtime	No	No
DGUS	76886	Us,Infant Hips,Real Time;Limited, Static	No	No
DGUS	76970	Us Study Follow Up	No	No
DGUS	76975	Ultrasound Gastrointestinal, Endoscopic	No	No
DGUS	76978	Ultrasound, targeted dynamic microbubble sonographic contrast characterization (non-cardiac); initial lesion	No	No
DGUS	76979	Ultrasound, targeted dynamic microbubble sonographic contrast characterization (non-cardiac); each additional lesion with separate injection (List separately in addition to code for primary procedure)	No	No
DGUS	76999	Echo Examination Procedure	No	No
CT	77011	CT For Stereotactic Localization	No	No
CT	77012	Computed tomography guidance for needle placement (eg, biopsy, aspiration, injection, localization device), radiological supervision and interpretation	No	No
CT	77013	CT Guidance For Procedures For Ablation	No	No
CT	77014	CT Guide Plcmnt Radiation	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

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MRI	77021	Magnetic resonance imaging guidance for needle placement (eg, for biopsy, needle aspiration, injection, or placement of localization device) radiological supervision and interpretation	Yes	Yes
MRI	77022	Magnetic resonance imaging guidance for, and monitoring of, parenchymal tissue ablation	No	No
BMRI	77046	Magnetic resonance imaging, breast, without contrast material; unilateral	Yes	Yes
BMRI	77047	Magnetic resonance imaging, breast, without contrast material; bilateral	Yes	Yes
BMRI	77048	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral	Yes	Yes
BMRI	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	Yes	Yes
CT	77078	Computed Tomography, bone mineral density study, 1 or more sites; axial skeleton	No	No
MRI	77084	Magnetic resonance (eg, proton) imaging, bone marrow blood supply	Yes	Yes
NUC MED	78013	Thyroid imaging (including vascular flow, when performed)	No	No
NUC MED	78014	Thyroid imaging (including vascular flow, when performed); with single or multiple uptake(s) quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)	No	No
NUC MED	78015	Thyroid Met Imaging	No	No
NUC MED	78016	Thyroid Met Imaging With Additional Studies	No	No
NUC MED	78018	Thyroid Scan Whole Body	No	No
NUC MED	78020	Thyroid Carcinoma Metastases Uptake	No	No
NUC MED	78070	Parathyroid planar imaging (including subtraction, when performed)	No	No
NUC MED	78071	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)	No	No
NUC MED	78072	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computed tomography (CT) for anatomical localization	No	No
NUC MED	78075	Adrenal Nuclear Imaging	No	No



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NUC MED	78099	Unlisted endocrine procedure	No	No
NUC MED	78102	Bone Marrow Imaging, Limited	No	No
NUC MED	78103	Bone Marrow Imaging, Multiple	No	No
NUC MED	78104	Bone Marrow Imaging, Whole Body	No	No
NUC MED	78135	Red Cell Survival Differential	No	No
NUC MED	78140	Labeled Red Cell Sequestration	No	No
NUC MED	78185	Spleen Imaging With & Without Vascular Flow	No	No
NUC MED	78190	Platelet Survival W/ Or W/Out Differential Organ/Tissue Localization	No	No
NUC MED	78191	Platelet Survival Study Only	No	No
NUC MED	78195	Lymph System Imaging	No	No
NUC MED	78199	Unlisted Hematopoetic Procedure	No	No
NUC MED	78201	Liver Imaging	No	No
NUC MED	78202	Liver Imaging With Flow	No	No
NUC MED	78205	Liver Imaging SPECT (3D)	No	No
NUC MED	78206	Liver Imaging SPECT With Vasulcar Flow	No	No
NUC MED	78215	Liver & Spleen Imaging	No	No
NUC MED	78216	Liver & Spleen Imaging With Flow	No	No
NUC MED	78226	Hepatobiliary system imaging, including gallbladder when present;	No	No
NUC MED	78227	Hepatobiliary system imaging, including gallbladder when present; with pharmacologic intervention, including quantitative measurement(s) when performed	No	No
NUC MED	78230	Salivary Gland Imaging	No	No
NUC MED	78231	Serial Salivary Gland	No	No
NUC MED	78232	Salivary Gland Function Exam	No	No
NUC MED	78258	Esophogus Motility Study	No	No
NUC MED	78261	Gastric Mucosa Imaging	No	No
NUC MED	78262	Gastroesophageal Reflux Exam	No	No
NUC MED	78264	Gastric Emptying Study	No	No
NUC MED	78265	Gastric emptying imaging study (eg, solid, liquid, or both); with small bowel transit	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

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NUC MED	78266	Gastric emptying imaging study (eg, solid, liquid, or both); with small bowel and colon transit, multiple days	No	No
NUC MED	78270	B-12 Absorption With Out Intrinsic Factor	No	No
NUC MED	78271	B-12 Absorption With Intrinsic Factor	No	No
NUC MED	78278	GI Bleeder Scan	No	No
NUC MED	78282	Gastronintestinal protein loss	No	No
NUC MED	78290	Meckels Diverticulum Imaging	No	No
NUC MED	78291	Leveen Shunt Patency Exam	No	No
NUC MED	78299	Unlisted Gastrointestinal Procedure	No	No
NUC MED	78300	Bone Or Joint Imaging Limited	No	No
NUC MED	78305	Bone Or Joint Imaging Multiple	No	No
NUC MED	78306	Bone Scan Whole Body	No	No
NUC MED	78315	Bone Scan 3 Phase Study	No	No
NUC MED	78320	Bone Joint Imaging Tomo Test SPECT	No	No
NUC MED	78399	Unlisted Musculoskeletal Procedure	No	No
NUC MED	78414	Non-Imaging Heart Function	No	No
NUC MED	78428	Cardiac Shunt Imaging	No	No
CPET	78429	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan	Yes	Yes
CPET	78430	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	Yes	Yes
CPET	78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	Yes	Yes



MVP Health Care

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CPET	78432	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability);	Yes	Yes
CPET	78433	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan	Yes	Yes
NUC MED	78445	Radionuclide Venogram Non-Cardiac	No	No
NUC CARD	78451	78451 myocardial perfusion imaging, tomographic (spect) including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)	Yes	Yes
NUC CARD	78452	Myocardial perfusion imaging, tomographic (spect) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection	Yes	Yes
NUC CARD	78453	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)	Yes	Yes
NUC CARD	78454	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection	Yes	Yes
NUC MED	78456	Acute Venous Thrombosis Imaging	No	No
NUC MED	78457	Venous Thrombosis Imaging Unilateral	No	No
NUC MED	78458	Venous Thrombosis Images, Bilateral	No	No
CPET	78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study	Yes	Yes
NUC MED	78466	Myocardial Infarction Scan	Yes	Yes



MVP Health Care Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
NUC MED	78468	Heart Infarct Image Ejection Fraction	Yes	Yes
NUC MED	78469	Heart Infarct Image 3D SPECT	Yes	Yes
NUC MED	78472	Cardiac Bloodpool Img, Single	Yes	Yes
NUC MED	78473	Cardiac Bloodpool Img, Multi	Yes	Yes
NUC MED	78481	Heart First Pass Single	Yes	Yes
NUC MED	78483	Cardiac Blood Pool Imaging -- Multiple	Yes	Yes
CPET	78491	Myocardial imaging, positron emission tomography (PET), perfusion study(including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic)	Yes	Yes
CPET	78492	Myocardial imaging, positron emission tomography (PET), perfusion study(including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and/or stress (exercise or pharmacologic)	Yes	Yes
NUC MED	78494	Cardiac Blood Pool Imaging , SPECT	Yes	Yes
NUC MED	78496	Cardiac Blood Pool Imaging - Single Study @ Rest	Yes	Yes
NUC MED	78499	Unlisted Cardiovascular Procedure	Redirect to valid code	Redirect to valid code
NUC MED	78579	Pulmonary ventilation imaging (eg, aerosol or gas)	No	No
NUC MED	78580	Pulmonary perfusion imaging (eg, particulate)	No	No
NUC MED	78582	Pulmonary ventilation (eg, aerosol or gas) and perfusion imaging	No	No
NUC MED	78585	Pulmonary Perfusion With Washout With Or Without Single Breath	No	No
NUC MED	78597	Quantitative differential pulmonary perfusion, including imaging when performed	No	No
NUC MED	78598	Quantitative differential pulmonary perfusion and ventilation (eg, aerosol or gas), including imaging when performed	No	No
NUC MED	78599	Unlisted Respiratory Procedure	No	No
NUC MED	78600	Brain Imaging Limited Static	No	No
NUC MED	78601	Brain Limited Imaging And Flow	No	No
NUC MED	78605	Brain Imaging Complete	No	No
NUC MED	78606	Brain Imaging Complete With Flow	No	No



MVP Health Care Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
NUC MED	78607	Brain Imaging 3D	No	No
PET	78608	Brain Imaging, Positron Emission Tomography (PET) Metabolic Evaluation	Yes	Yes
PET	78609	Brain Imaging, Positron Emission Tomography (PET) Perfusion Evaluation	I/E	I/E
NUC MED	78610	Brain Flow Imaging Only	No	No
NUC MED	78630	Cisternogram (Cerebrospinal Fluid Flow)	No	No
NUC MED	78635	Cerebrospinal Ventriculography	No	No
NUC MED	78645	CSF Shunt Evaluation	No	No
NUC MED	78647	Cerebrospinal Fluid Scan (Tomographic) SPECT	No	No
NUC MED	78650	C S F Leakage Detection And Localization	No	No
NUC MED	78660	Radiopharmaceutical Dacryocystography	No	No
Unlisted	78699	Unlisted Nuclear Medicine Procedure	Redirect to valid code	Redirect to valid code
NUC MED	78700	Kidney Imaging Morphology	No	No
NUC MED	78701	Kidney Imaging With Vascular Flow	No	No
NUC MED	78707	Kidney Imaging With Vascular Flow & Function Single Study Without Pharmacological Intervention	No	No
NUC MED	78708	Kidney Imaging Single Study With Pharmacological Intervention	No	No
NUC MED	78709	Kidney Imaging - Multiple Studies Without & With Pharmacological Intervention	No	No
NUC MED	78710	Kidney Imaging - Tomographic (SPECT)	No	No
NUC MED	78725	Kidney Function Study - Non-Imaging Radioisotopic	No	No
NUC MED	78730	Urinary Bladder Residual Study	No	No
NUC MED	78740	Ureteral Reflux Study	No	No
NUC MED	78761	Testicular Imaging With Vascular Flow	No	No
NUC MED	78799	Unlisted Genitourinary Procedure	No	No
NUC MED	78800	Radiopharm Localization Of Tumor, Limited Area	No	No
NUC MED	78801	Radiopharm Localization Of Tumor, Multiple Areas	No	No
NUC MED	78802	Radiopharm Localization Of Tumor, Whole Body	No	No
NUC MED	78803	Radiopharm Localization Of Tumor Tomographic (SPECT)	No	No
NUC MED	78804	Radiopharm Localization Of Tumor, Whole Body	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
NUC MED	78805	Radiopharm Localization Of Abscess, Limited Area	No	No
NUC MED	78806	Radiopharm Localization Of Abscess, Whole Body	No	No
NUC MED	78807	Radiopharm Localization Of Abscess, Tomographic SPECT	No	No
PET	78811	Tumor Imaging, Positron Emission Tomography (Pet); Limited Area (Eg, Chest, Head/Neck)	Yes	Yes
PET	78812	Tumor Imaging, Positron Emission Tomography (Pet); Skull Base To Mid-Thigh	Yes	Yes
PET	78813	Positron Emission Tomography (Pet); Whole Body	Yes	Yes
PETCT	78814	Tumor Imaging, Positron Emission Tomography (Pet) With Concurrently Acquired Computer Tomography (Ct) For Attenuation Correction And Anatomical Localization; Limited Area (Eg Chest, Head/Neck)	Yes	Yes
PETCT	78815	Tumor Imaging, Positron Emission Tomography (Pet) With Concurrently Acquired Computer Tomography (Ct) For Attenuation Correction And Anatomical Localization; Skull Base To Mid-Thigh	Yes	Yes
PETCT	78816	Tumor Imaging, Positron Emission Tomography (Pet) With Concurrently Acquired Computer Tomography (Ct) For Attenuation Correction And Anatomical Localization; Whole Body	Yes	Yes
NUC MED	78999	Unlisted Misc.Procedure Diagnostic Nuclear Med	Redirect to valid code	Redirect to valid code
ECHO	93303	Transthoracic echocardiography for congenital cardiac anomalies; complete	No	No
ECHO	93304	Transthoracic echocardiography for congenital cardiac anomalies; follow-up or limited study	No	No
ECHO	93306	Echocardiography, transthoracic, real-time with image documentation (2d), includes m-mode recording, when performed, complete, with spectral doppler echocardiography, and with color flow doppler echocardiography	No	No
ECHO	93307	Echocardiography, transthoracic, real-time with image documentation (2d) with or without m-mode recording; complete	No	No
ECHO	93308	Echocardiography, transthoracic, real-time with image documentation (2d) with or without m-mode recording; follow-up or limited study	No	No
ECHO	93312	TEE 2D;Incl Probe Placement, Imaging/Interp/Report	No	No
ECHO	93313	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); placement of transesophageal probe only	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
ECHO	93314	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); image acquisition, interpretation and report only	No	No
ECHO	93315	Transesophageal echocardiography for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report	No	No
ECHO	93316	Transesophageal echocardiography for congenital cardiac anomalies; placement of transesophageal probe only	No	No
ECHO	93317	Transesophageal echocardiography for congenital cardiac anomalies; image acquisition, interpretation and report only	No	No
ECHO	93318	Echo transesophageal intraop	No	No
ECHO	93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; complete	No	No
ECHO	93321	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; follow-up or limited study	No	No
ECHO	93325	Doppler echocardiography color flow velocity mapping	No	No
XSE	93350	Echocardiography, transthoracic, real-time with image documentation (2d), with or without m-mode recording, during rest and cardiovascular stress test, with interpretation and report	No	No
XSE	93351	Echocardiography, transthoracic, real-time with image documentation (2d), includes m-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation	No	No
XSE	93352	Use of echocardiographic contrast agent during stress echocardiography (list separately in addition to code for primary procedure)	No	No
DHC	93451	Right heart catheterization including measurement(s) of oxygen saturation and cardiac output, when performed	No	No
DHC	93452	Left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	No	No
DHC	93453	Combined right and left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	No	No
DHC	93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
DHC	93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial venous grafts) including intraprocedural injection(s) for bypass graft angiography	No	No
DHC	93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	No	No
DHC	93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization	No	No
DHC	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	No	No
DHC	93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	No	No
DHC	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	No	No
DHC	93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
DHC	93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture (list separately in addition to code for primary procedure)	No	No
DHC	93530	Right heart catheterization (chd)	No	No
DHC	93531	Right/left heart catheterization (chd)	No	No
DHC	93532	Right/left heart catheterization (chd-ts)	No	No
DHC	93533	Right/left heart catheterization (cad-asd)	No	No
DGUS	93880	Duplex Scan Extracranial Arter	No	No
DGUS	93882	Duplex Scan Extracranial Arter	No	No
DGUS	93886	Transcranial Doppler Study Int	No	No
DGUS	93888	Transcranial Doppler Study Int	No	No
DGUS	93890	Transcranial Doppler Vasoreactivity Study	No	No
DGUS	93892	Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection	No	No
DGUS	93893	Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection With Intravenous Microbubble Injection	No	No
DGUS	93922	Non-Invasive Physiologic Studi	No	No
DGUS	93923	Non-Invasive Physiologic Studi	No	No
DGUS	93924	Non-Invasive Physiologic Studi	No	No
DGUS	93925	Duplex Scan Low Ext. Art. Or A	No	No
DGUS	93926	Duplex Scan Low Ext. Art. Or A	No	No
DGUS	93930	Duplex Scan Up Ext. Art. Or Ar	No	No
DGUS	93931	Duplex Scan Up Ext. Art. Or Ar	No	No
DGUS	93970	Duplex Scan Ext. Veins, Comple	No	No
DGUS	93971	Duplex Scan Ext. Veins, Unilat	No	No
DGUS	93975	Duplex scan of arterial inflow and venous outflow of abdominal, pelvic, scrotal contents and/or retroperitoneal organs; complete study	No	No
DGUS	93976	Duplex scan of arterial inflow and venous outflow of abdominal, pelvic, scrotal contents and/or retroperitoneal organs; limited study	No	No
DGUS	93978	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; complete study	No	No



MVP Health Care

Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
DGUS	93979	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; unilateral or limited study	No	No
DGUS	93980	Duplex scan of arterial inflow and venous outflow of penile vessels; complete study	No	No
DGUS	93981	Duplex scan of arterial inflow and venous outflow of penile vessels; follow-up or limited study	No	No
DGUS	93990	Duplex scan of hemodialysis access (including arterial inflow, body of access and venous outflow)	No	No
CT	0042T	CT Perfusion Brain	Yes	Yes
CID	0319T	Insertion or replacement of subcutaneous implantable defibrillator system with subcutaneous electrode	No	No
MRI	0398T	Magnetic resonance image guided high intensity focused ultrasound (MRgFUS), stereotactic ablation lesion, intracranial for movement disorder including stereotactic navigation and frame placement when performed	No	No
CID	0515T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; complete system (includes electrode and generator [transmitter and battery])	No	No
CID	0516T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; electrode only	No	No
CID	0517T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; pulse generator component(s) (battery and/or transmitter) only	No	No
CID	0519T	Removal and replacement of wireless cardiac stimulator for left ventricular pacing; pulse generator component(s) (battery and/or transmitter)	No	No
CID	0520T	Removal and replacement of wireless cardiac stimulator for left ventricular pacing; pulse generator component(s) (battery and/or transmitter), including placement of a new electrode	No	No



MVP Health Care Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
MR	0609T	Magnetic Resonance Spectroscopy, Determination And Localization Of Discogenic Pain (Cervical, Thoracic, Or Lumbar); Acquisition Of Single Voxel Data, Per Disc, On Biomarkers (Ie, Lactic Acid, Carbohydrate, Alanine, Laal, Propionic Acid, Proteoglycan, And Collagen) In At Least 3 Discs - Effective Date 03.01.21	I/E	I/E
MR	0610T	Magnetic Resonance Spectroscopy, Determination And Localization Of Discogenic Pain (Cervical, Thoracic, Or Lumbar); Transmission Of Biomarker Data For Software Analysis - Effective Date 03.01.21	I/E	I/E
MR	0611T	Magnetic Resonance Spectroscopy, Determination And Localization Of Discogenic Pain (Cervical, Thoracic, Or Lumbar); Postprocessing For Algorithmic Analysis Of Biomarker Data For Determination Of Relative Chemical Differences Between Discs - Effective Date 03.01.21	I/E	I/E
MR	0612T	Magnetic Resonance Spectroscopy, Determination And Localization Of Discogenic Pain (Cervical, Thoracic, Or Lumbar); Interpretation And Report - Effective Date 03.01.21	I/E	I/E
CCTA	0623T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission, computerized analysis of data, with review of computerized analysis output to reconcile discordant data, interpretation and report. Effective 9/1/2021 AMA Additions	I/E	I/E
CCTA	0624T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission. Effective 9/1/2021 AMA Additions	I/E	I/E
CCTA	0625T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; computerized analysis of data from coronary computed tomographic angiography. Effective 9/1/2021 AMA Additions	I/E	I/E



MVP Health Care

Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
CCTA	0626T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; review of computerized analysis output to reconcile discordant data, interpretation and report. <i>Effective 9/1/2021 AMA Additions</i>	I/E	I/E
CT	0633T	Computed Tomography, Breast, Including 3d Rendering, When Performed, Unilateral; Without Contrast Material - <i>Effective Date 03.01.21</i>	I/E	I/E
CT	0634T	Computed Tomography, Breast, Including 3d Rendering, When Performed, Unilateral; With Contrast Material(s) - <i>Effective Date 03.01.21</i>	I/E	I/E
CT	0635T	Computed Tomography, Breast, Including 3d Rendering, When Performed, Unilateral; Without Contrast, Followed By Contrast Material(s) - <i>Effective Date 03.01.21</i>	I/E	I/E
CT	0636T	Computed Tomography, Breast, Including 3d Rendering, When Performed, Bilateral; Without Contrast Material(S) - <i>Effective Date 03.01.21</i>	I/E	I/E
CT	0637T	Computed Tomography, Breast, Including 3d Rendering, When Performed, Bilateral; With Contrast Material(s) - <i>Effective Date 03.01.21</i>	I/E	I/E
CT	0638T	Computed Tomography, Breast, Including 3d Rendering, When Performed, Bilateral; Without Contrast, Followed By Contrast Material(S) - <i>Effective Date 03.01.21</i>	I/E	I/E
MRI	0648T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; single organ. <i>Effective 7/1/2021 AMA Additions</i>	I/E	I/E
MRI	0649T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); single organ (List separately in addition to code for primary procedure). <i>Effective 7/1/2021 AMA Additions</i>	I/E	I/E



MVP Health Care

Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
MRI	0697T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; multiple organs	I/E	I/E
MRI	0698T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); multiple organs (List separately in addition to code for primary procedure)	I/E	I/E
CT (CTA)	0710T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; including data preparation and transmission, quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability, data review, interpretation and report	I/E	I/E
CT (CTA)	0711T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; data preparation and transmission	I/E	I/E
CT (CTA)	0712T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability	I/E	I/E
CT (CTA)	0713T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; data review, interpretation and report	I/E	I/E
NUC CARD	0742T	Absolute quantitation of myocardial blood flow (AQMBF), single-photon emission computed tomography (SPECT), with exercise or pharmacologic stress, and at rest, when performed (List separately in addition to code for primary procedure)	I/E	I/E



MVP Health Care Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
MRI	0865T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion identification, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the brain during the same session	I/E	I/E
MRI	0866T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion detection, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the brain (List separately in addition to code for primary procedure)	Yes	Yes
MRA	C8900	MRA Abdomen with contrast	Redirect to valid code	Redirect to valid code
MRA	C8901	MRA Abdomen without contrast	Redirect to valid code	Redirect to valid code
MRA	C8902	MRA Abdomen with and w/o contrast	Redirect to valid code	Redirect to valid code
MRI	C8903	MRI Breast w/ contrast, unilateral	Redirect to valid code	Redirect to valid code
MRI	C8905	MRI Breast w. and w/o contrast, unilateral	Redirect to valid code	Redirect to valid code
MRI	C8906	MRI Breast Bilateral W/ Contrast	Redirect to valid code	Redirect to valid code
MRI	C8908	MRI Breast Bilateral W/ And W/O Contrast	Redirect to valid code	Redirect to valid code
MRA	C8909	MRA chest w/contrast (excluding myocardium)	Redirect to valid code	Redirect to valid code
MRA	C8910	MRA chest w/o contrast (excluding myocardium)	Redirect to valid code	Redirect to valid code
MRA	C8911	MRA chest (excluding myocardium)	Redirect to valid code	Redirect to valid code



MVP Health Care Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
MRA	C8912	MRA lower extremity w/ contrast	Redirect to valid code	Redirect to valid code
MRA	C8913	MRA lower extremity w/o contrast	Redirect to valid code	Redirect to valid code
MRA	C8914	MRA lower extremity w/ and w/o contrast	Redirect to valid code	Redirect to valid code
MRA	C8918	MRA pelvis w/ contrast	Redirect to valid code	Redirect to valid code
MRA	C8919	MRA pelvis w/o contrast	Redirect to valid code	Redirect to valid code
MRA	C8920	MRA pelvis w/ and w/o contrast	Redirect to valid code	Redirect to valid code
ECHO	C8921	Transthoracic echocardiography w/contrast for congenital cardiac anomalies; complete	No	No
ECHO	C8922	Transthoracic echocardiography w/contrast for congenital cardiac anomalies; f/u or limited study	No	No
ECHO	C8923	Transthoracic echocardiography w/contrast, real-time w/image documentation (2d), w/wo m-mode recording; complete	No	No
ECHO	C8924	Transthoracic echocardiography w/contrast, real-time w/image documentation (2d), w/wo m-mode recording; f/u or limited study	No	No
ECHO	C8928	Transthoracic echocardiography w/contrast, real-time w/image documentation (2d), w/wo m-mode recording, during rest and cardiovascular stress test, w/interpretation and report	No	No
ECHO	C8929	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, real-time with image documentation (2d), includes m-mode recording, when performed, complete, with spectral doppler echocardiography, and with color flow doppler echocardiography	No	No
ECHO	C8930	Transthoracic echocardiography, with contrast, or without contrast followed by with contrast, real-time with image documentation (2d), includes m-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with physician supervision	No	No



MVP Health Care
Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
MRA	C8931	MRA, W/Dye, Spinal Canal	Redirect to valid code	Redirect to valid code



MVP Health Care Prior Authorization Procedure List: Radiology

Category/ Grouping	CPT® Code	CPT® Code Description	Commercial (incl/EP) & select ASO groups Requires Prior Authorization	Medicare Requires Prior Authorization
MRA	C8932	MRA, W/O Dye, Spinal Canal	Redirect to valid code	Redirect to valid code
MRA	C8933	MRA, W/O&W/Dye, Spinal Canal	Redirect to valid code	Redirect to valid code
MRA	C8934	MRA, W/Dye, Upper Extremity	Redirect to valid code	Redirect to valid code
MRA	C8935	MRA, W/O Dye, Upper Extr	Redirect to valid code	Redirect to valid code
MRA	C8936	MRA, W/O&W/Dye, Upper Extr	Redirect to valid code	Redirect to valid code
MRI	C9762	Cardiac Magnetic Resonance Imaging For Morphology And Function, Quantification Of Segmental Dysfunction; With Strain Imaging - Effective Date 03.01.21	I/E	I/E
MRI	C9763	Cardiac Magnetic Resonance Imaging For Morphology And Function, Quantification Of Segmental Dysfunction; With Stress Imaging - Effective Date 03.01.21	I/E	I/E
MRI	C9791	Magnetic resonance imaging with inhaled hyperpolarized xenon-129 contrast agent, chest, including preparation and administration of agent	I/E	I/E
PET	G0219	Pet Imaging Whole Body; Melanoma For Non-Covered Indications	I/E	I/E
PET	G0235	Pet Imaging, Any Site, Not Otherwise Specified	Redirect to valid code	Redirect to valid code
PET	G0252	Pet Imaging, Full And Partial-Ring Pet Scanners Only For Initial Diagnosis Of Breast Cancer And/Or Surgical Planning For Breast Cancer	I/E	I/E
MRI	S8037	Magnetic resonance cholangiopancreato-graphy (MRCP)	No	No
MRI	S8042	Magnetic Resonance Imaging (Mri), Low-Field	Redirect to valid code	Redirect to valid code
CT	S8080	Scintimammography (Radioimmunosintigraphy Of The Breast), Unilateral, Including Supply Of Radiopharmaceutical	I/E	I/E
PET	S8085	Fluorine-18 Fluorodeoxyglucose (F-18 Fdg) Imaging Using Dual Head Coincidence Detection System. (Non-Dedicated Pet Scan)	I/E	I/E
CT	S8092	Electron Beam Computed Tomography (Also Known As Ultrafast Ct, Cinet)	I/E	I/E

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