

February 27, 2018

Facility Name Office Manager Address 1 Address 2 City, State, Zip

Dear Office Manager,

Attached is an updated list of imaging codes that require authorization for your patients with health insurance provided by Piedmont Community Health Plan. This list replaces previous information as applicable and is effective March 1, 2018.

PCHP asks that all in-network providers use our electronic referral system to request authorizations and to submit required additional documentation whenever possible. For more information, please contact me at the phone number or email address below.

We thank you for your cooperation and assistance in helping us deliver the best service to our members and providers.

Regards,

Barb Schlesinger-Nash, SPHR, SHRM-SCP

Director, Client/Provider Relations Piedmont Community Health Plan

Barb.Schlesinger-Nash@pchp.net

(434) 947-4463 ext. 223

(434) 841-3945 (cell)

Attachment: Appendix A

This listing is applicable to Piedmont Community Health Plan 2018 Plans. This list replaces previous information as applicable.

СРТ	
code	DESCRIPTION
70336	MAGNETIC IMAGE JAW JOINT
70540	MRI ORBIT/FACE/NECK W/O DYE
70542	MRI ORBIT/FACE/NECK W/DYE
70543	MRI ORBT/FAC/NCK W/O &W/DYE
70544	MR ANGIOGRAPHY HEAD W/O DYE
70545	MR ANGIOGRAPHY HEAD W/DYE
70546	MR ANGIOGRAPH HEAD W/O&W/DYE
70547	MR ANGIOGRAPHY NECK W/O DYE
70548	MR ANGIOGRAPHY NECK W/DYE
70549	MR ANGIOGRAPH NECK W/O&W/DYE
70551	MRI BRAIN STEM W/O DYE
70552	MRI BRAIN STEM W/DYE
70553	MRI BRAIN STEM W/O & W/DYE
70554	FMRI BRAIN BY TECH
70555	FMRI BRAIN BY PHYS/PSYCH
70557	MRI BRAIN W/O DYE
70558	MRI BRAIN W/DYE
70559	MRI BRAIN W/O & W/DYE
71550	MRI CHEST W/O DYE
71551	MRI CHEST W/DYE
71552	MRI CHEST W/O & W/DYE
71555	MRI ANGIO CHEST W OR W/O DYE
72141	MRI NECK SPINE W/O DYE
72142	MRI NECK SPINE W/DYE
72146	MRI CHEST SPINE W/O DYE
72147	MRI CHEST SPINE W/DYE
72148	MRI LUMBAR SPINE W/O DYE
72149	MRI LUMBAR SPINE W/DYE
72156	MRI NECK SPINE W/O & W/DYE
72157	MRI CHEST SPINE W/O & W/DYE
72158	MRI LUMBAR SPINE W/O & W/DYE
72159	MR ANGIO SPINE W/O&W/DYE
72195	MRI PELVIS W/O DYE
72196	MRI PELVIS W/DYE
72197	MRI PELVIS W/O & W/DYE
72198	MR ANGIO PELVIS W/O & W/DYE
72240	MYELOGRAPHY NECK SPINE
72255	MYELOGRAPHY THORACIC SPINE
72265	MYELOGRAPHY L-S SPINE
72270	MYELOGPHY 2/> SPINE REGIONS
72285	DISCOGRAPHY CERV/THOR SPINE
73218	MRI UPPER EXTREMITY W/O DYE
73219	MRI UPPER EXTREMITY W/DYE
73220	MRI UPPR EXTREMITY W/O&W/DYE
73221	MRI JOINT UPR EXTREM W/O DYE
73222	MRI JOINT UPR EXTREM W/DYE
73223	MRI JOINT UPR EXTR W/O&W/DYE
73225	MR ANGIO UPR EXTR W/O&W/DYE

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СРТ	
code	DESCRIPTION
73718	MRI LOWER EXTREMITY W/O DYE
73719	MRI LOWER EXTREMITY W/DYE
73720	MRI LWR EXTREMITY W/O&W/DYE
73721	MRI JNT OF LWR EXTRE W/O DYE
73722	MRI JOINT OF LWR EXTR W/DYE
73723	MRI JOINT LWR EXTR W/O&W/DYE
73725	MR ANG LWR EXT W OR W/O DYE
74181	MRI ABDOMEN W/O DYE
74182	MRI ABDOMEN W/DYE
74183	MRI ABDOMEN W/O & W/DYE
74185	MRI ANGIO ABDOM W ORW/O DYE
74328	X-RAY BILE DUCT ENDOSCOPY
74329	X-RAY FOR PANCREAS ENDOSCOPY
74330	X-RAY BILE/PANC ENDOSCOPY
74712	MRI FETAL SNGL/1ST GESTATION
74713	MRI FETAL EA ADDL GESTATION
75557	CARDIAC MRI FOR MORPH
75559	CARDIAC MRI W/STRESS IMG
75561	CARDIAC MRI FOR MORPH W/DYE
75563	CARD MRI W/STRESS IMG & DYE
75565	CARD MRI VELOC FLOW MAPPING
75953	ABDOM ANEURYSM ENDOVAS RPR
75954	ILIAC ANEURYSM ENDOVAS RPR
76390	MR SPECTROSCOPY
76498	MRI PROCEDURE
76499	RADIOGRAPHIC PROCEDURE
77021	MR GUIDANCE FOR NEEDLE PLACE
77022	MRI FOR TISSUE ABLATION
77084	MAGNETIC IMAGE BONE MARROW
78102	BONE MARROW IMAGING LTD
78103	BONE MARROW IMAGING MULT
78104	BONE MARROW IMAGING BODY
78300	BONE IMAGING LIMITED AREA
78305	BONE IMAGING MULTIPLE AREAS
78306	BONE IMAGING WHOLE BODY
78315	BONE IMAGING 3 PHASE
78320	BONE IMAGING (3D)
78459	HEART MUSCLE IMAGING (PET)
78491	HEART IMAGE (PET) SINGLE
78492	HEART IMAGE (PET) MULTIPLE
78608	BRAIN IMAGING (PET)
78609	BRAIN IMAGING (PET)
78800	TUMOR IMAGING LIMITED AREA
78801	TUMOR IMAGING MULT AREAS
78802	TUMOR IMAGING WHOLE BODY
78803	TUMOR IMAGING (3D)
78804	TUMOR IMAGING (35)
78811	PET IMAGE LTD AREA
70011	I ET IMAGE ETD AILEA

## Ref. Effective 3/1/18 Appendix A - Imaging Codes Requiring Authorization – All product lines

This listing is applicable to Piedmont Community Health Plan 2018 Plans. This list replaces previous information as applicable.

CPT	
code	DESCRIPTION
78812	PET IMAGE SKULL-THIGH
78813	PET IMAGE FULL BODY
78814	PET IMAGE W/CT LMTD
78815	PET IMAGE W/CT SKULL-THIGH
78816	PET IMAGE W/CT FULL BODY