1st quarter 2025

This list is subject to change once per quarter. Changes will be posted to the BCBSNC website at www.bluecrossnc.com
If the member's group is not enrolled in the Carelon Medical Benefits Management program indicated, PPA is not required for that procedure in the specified place of service

<u>Current Radiology Guidelines | Carelon Clinical Guidelines and Pathways</u>—access this link to view Radiology guidelines from Carelon

Carelon MBM provider portal—access this link to request Prior Authorization for any code listed below

Code 70336	Description MRI temporomandibular joint(s)	Notice Date 1/1/2023	Effective Date 4/24/2023	Ineffective Date
70450	CT head or brain; w/o contrast	1/1/2023	4/24/2023	
70460	CT head or brain; with contrast	1/1/2023	4/24/2023	
70470	CT head or brain; w/o contrast followed by contrast	1/1/2023	4/24/2023	
70480	CT orbit, sella or posterior fossa; w/o contrast	1/1/2023	4/24/2023	
70481	CT orbit, sella or posterior fossa; with contrast	1/1/2023	4/24/2023	
70482	CT orbit, sella or posterior fossa; w/o contrast followed by contrast	1/1/2023	4/24/2023	
70486	CT maxillofacial area; w/o contrast	1/1/2023	4/24/2023	
70487	CT maxillofacial area; with contrast	1/1/2023	4/24/2023	
70488	CT maxillofacial area; w/o contrast followed by contrast	1/1/2023	4/24/2023	
70490	CT soft tissue neck; w/o contrast	1/1/2023	4/24/2023	
70491	CT soft tissue neck; with contrast	1/1/2023	4/24/2023	
70492	CT soft tissue neck; w/o contrast followed by contrast	1/1/2023	4/24/2023	
70496	CTA head	1/1/2023	4/24/2023	
70498	CTA neck	1/1/2023	4/24/2023	
70540	MRI orbit, face and neck; w/o contrast	1/1/2023	4/24/2023	
70542	MRI orbit, face and neck; with contrast	1/1/2023	4/24/2023	
70543	MRI orbit, face and neck; w/o contrast followed by contrast	1/1/2023	4/24/2023	
70544	MRA head; w/o contrast	1/1/2023	4/24/2023	
70545	MRA head; with contrast	1/1/2023	4/24/2023	
70546	MRA head; w/o contrast followed by contrast	1/1/2023	4/24/2023	
70547	MRA neck; w/o contrast	1/1/2023	4/24/2023	
70548	MRA neck; with contrast	1/1/2023	4/24/2023	
70549	MRA neck; w/o contrast followed by contrast	1/1/2023	4/24/2023	

	Carefull Medical Deficits Management Program Phot A	utilolization List-E	The interior of the state of th
Code 70551	Description MRI brain; w/o contrast	Notice Date 1/1/2023	Effective Date Ineffective Date 4/24/2023
70552	MRI brain; with contrast	1/1/2023	4/24/2023
70553	MRI brain; w/o contrast followed by contrast	1/1/2023	4/24/2023
70554	FMRI brain; by tech	1/1/2023	4/24/2023
70555	FMRI brain; by phys/psych	1/1/2023	4/24/2023
71250	CT thorax; w/o contrast	1/1/2023	4/24/2023
71260	CT thorax; with contrast	1/1/2023	4/24/2023
71270	CT thorax; w/o contrast followed by contrast	1/1/2023	4/24/2023
71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	1/1/2023	4/24/2023
71275	CTA chest (noncoronary)	1/1/2023	4/24/2023
71550	MRI chest; w/o contrast	1/1/2023	4/24/2023
71551	MRI chest; with contrast	1/1/2023	4/24/2023
71552	MRI chest; w/o contrast followed by contrast	1/1/2023	4/24/2023
71555	MRA chest; with or w/o contrast	1/1/2023	4/24/2023
72125	CT cervical spine; w/o contrast	1/1/2023	4/24/2023
72126	CT cervical spine; with contrast	1/1/2023	4/24/2023
72127	CT cervical spine; w/o contrast followed by contrast	1/1/2023	4/24/2023
72128	CT thoracic spine; w/o contrast	1/1/2023	4/24/2023
72129	CT thoracic spine; with contrast	1/1/2023	4/24/2023
72130	CT thoracic spine; w/o contrast followed by contrast	1/1/2023	4/24/2023
72131	CT lumbar spine; w/o contrast	1/1/2023	4/24/2023
72132	CT lumbar spine; with contrast	1/1/2023	4/24/2023
72133	CT lumbar spine; w/o contrast followed by contrast	1/1/2023	4/24/2023
72141	MRI cervical spine; w/o contrast	1/1/2023	4/24/2023
72142	MRI cervical spine; with contrast	1/1/2023	4/24/2023
72146	MRI thoracic spine; w/o contrast	1/1/2023	4/24/2023
72147	MRI thoracic spine; with contrast	1/1/2023	4/24/2023
72148	MRI lumbar spine; w/o contrast	1/1/2023	4/24/2023

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Code 72149	Description MRI lumbar spine; with contrast	Notice Date 1/1/2023	Effective Date 4/24/2023	Ineffective Date
72156	MRI cervical spine; w/o contrast followed by contrast	1/1/2023	4/24/2023	
72157	MRI thoracic spine; w/o contrast followed by contrast	1/1/2023	4/24/2023	
72158	MRI lumbar spine; w/o contrast followed by contrast	1/1/2023	4/24/2023	
72159	MRA spinal canal and contents with or w/o contrast	1/1/2023	4/24/2023	
72191	CTA pelvis DIM	1/1/2023	4/24/2023	
72192	CT pelvis; w/o contrast	1/1/2023	4/24/2023	
72193	CT pelvis; with contrast	1/1/2023	4/24/2023	
72194	CT pelvis w/o contrast followed by contrast	1/1/2023	4/24/2023	
72195	MRI pelvis; w/o contrast	1/1/2023	4/24/2023	
72196	MRI pelvis; with contrast	1/1/2023	4/24/2023	
72197	MRI pelvis; w/o contrast followed by contrast	1/1/2023	4/24/2023	
72198	MRA pelvis; with or w/o contrast	1/1/2023	4/24/2023	
73200	CT upper extremity; w/o contrast	1/1/2023	4/24/2023	
73201	CT upper extremity; with contrast	1/1/2023	4/24/2023	
73202	CT upper extremity; w/o contrast followed by contrast	1/1/2023	4/24/2023	
73206	CTA upper extremity	1/1/2023	4/24/2023	
73218	MRI upper extremity, other than joint w/o contrast	1/1/2023	4/24/2023	
73219	MRI upper extremity, other than joint with contrast	1/1/2023	4/24/2023	
73220	MRI upper extremity, other than joint w/o contrast followed by contrast	1/1/2023	4/24/2023	
73221	MRI upper extremity, any joint w/o contrast	1/1/2023	4/24/2023	
73222	MRI upper extremity, any joint with contrast	1/1/2023	4/24/2023	
73223	MRI upper extremity, any joint w/o contrast followed by contrast	1/1/2023	4/24/2023	
73225	MRA upper extremity; with or w/o contrast	1/1/2023	4/24/2023	
73700	CT lower extremity; w/o contrast	1/1/2023	4/24/2023	
73701	CT lower extremity; with contrast	1/1/2023	4/24/2023	
73702	CT lower extremity; w/o contrast followed by contrast	1/1/2023	4/24/2023	
73706	CTA lower extremity	1/1/2023	4/24/2023	
73718	MRI lower extremity, other than joint w/o contrast	1/1/2023	4/24/2023	

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Code 73719	Description MRI lower extremity, other than joint w contrast	Notice Date 1/1/2023	Effective Date Ineffective Date 4/24/2023
73720	MRI lower extremity, other than joint w/o contrast followed by contrast	1/1/2023	4/24/2023
73721	MRI lower extremity, any joint w/o contrast	1/1/2023	4/24/2023
73722	MRI lower extremity, any joint w contrast	1/1/2023	4/24/2023
73723	MRI lower extremity, any joint w/o contrast followed by contrast	1/1/2023	4/24/2023
73725	MRA lower extremity; with or w/o contrast	1/1/2023	4/24/2023
74150	CT abdomen; w/o contrast	1/1/2023	4/24/2023
74160	CT abdomen; with contrast	1/1/2023	4/24/2023
74170	CT abdomen; w/o contrast followed by contrast	1/1/2023	4/24/2023
74174	CTA abdomen & pelvis	1/1/2023	4/24/2023
74175	CTA abdomen	1/1/2023	4/24/2023
74176	Computed tomography, abdomen and pelvis; without contrast material	1/1/2023	4/24/2023
74177	Computed tomography, abdomen and pelvis; with contrast	1/1/2023	4/24/2023
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	1/1/2023	4/24/2023
74181	MRI abdomen; w/o contrast	1/1/2023	4/24/2023
74182	MRI abdomen; with contrast	1/1/2023	4/24/2023
74183	MRI abdomen; w/o contrast followed by contrast	1/1/2023	4/24/2023
74185	MRA abdomen; with or w/o contrast	1/1/2023	4/24/2023
74261	CT Colonography, diagnostic, including image postprocessing, w/o contrast	1/1/2023	4/24/2023
74262	CT Colonography, diagnostic, including image postprocessing, with contrast	1/1/2023	4/24/2023
74712	MRI fetal; including placental and maternal pelvic imaging (initial gestation)	1/1/2023	4/24/2023
74713	MRI fetal; including placental and maternal pelvic imaging (each additional gestation)	1/1/2023	4/24/2023
75557	MRI cardiac for morphology & function, w/o contrast	1/1/2023	4/24/2023
75559	MRI cardiac for morphology & function, w/o contrast; w/stress imaging	1/1/2023	4/24/2023
75561	MRI cardiac for morphology & function, w/o contrast; followed by contrast & further sequences	1/1/2023	4/24/2023
75563	MRI cardiac for morphology & function, w/o contrast; followed by contrast & further sequences; w/stress imaging	1/1/2023	4/24/2023

Carelon Medical Benefits Management Program Prior Authorization List-Blue Medicare 1st quarter 2029	Carelon Me	dical Benefits	Management Program	m Prior Authorization	List-Blue Medicare	1st quarter 2025
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	Carelon Medical Benefits Management Program Prior Autho	orization List-Bi	ue iviedicare 1°	quarter 2025
Code 75565	Description Cardiac MRI for velocity flow mapping	Notice Date 1/1/2023	Effective Date 4/24/2023	Ineffective Date
75571	CT heart, w/o contrast, with quantitative evaluation of coronary calcium	1/1/2023	4/24/2023	
75572	CT 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)	1/1/2023	4/24/2023	
75573	CT heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of LV cardiac function, RV structure and function and evaluation)	1/1/2023	4/24/2023	
75574	CT 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)	1/1/2023	4/24/2023	
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	11/1/2023	1/1/2024	
75635	CTA abdominal aorta & bilateral iliofemoral lower extremity runoff	1/1/2023	4/24/2023	
76380	CT limited or localized follow-up study	1/1/2023	4/24/2023	
76390	MR Spectroscopy NOTE: (Non-covered by Original Medicare and Blue Medicare HMO and Blue Medicare PPO)	1/1/2023	4/24/2023	
76391	Magnetic resonance (eg, vibration) elastography	1/1/2023	4/24/2023	
77046	MRI breast, w/o contrast; unilateral	1/1/2023	4/24/2023	
77047	MRI breast, w/o contrast; bilateral	1/1/2023	4/24/2023	
77048	MRI breast, w/o contrast followed by contrast, including CAD; unilateral	1/1/2023	4/24/2023	
77049	MRI, breast, , w/o contrast followed by contrast, including CAD; bilateral	1/1/2023	4/24/2023	
77078	CT, bone mineral density study, 1 or more sites; axial skeleton (e.g. hips, pelvis, spine)	1/1/2023	4/24/2023	
77084	MRI bone marrow blood supply	1/1/2023	4/24/2023	
78012	Thyroid uptake, single or multiple quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)	1/1/2023	4/24/2023	
78013	Thyroid imaging (including vascular flow, when performed);	1/1/2023	4/24/2023	
78014	Thyroid imaging (including vascular flow, when performed); with single or multiple uptake(s) quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)	1/1/2023	4/24/2023	
78015	Thyroid carcinoma metastases imaging; limited area (eg, neck and chest only)	1/1/2023	4/24/2023	

	Carelon Medical Benefits Management Program Prior Aut	:horization List-	Blue Medicare 1	L st guarter 2025
Code	Description	Notice Date	Effective Date	Ineffective Date
78016	Thyroid carcinoma metastases imaging; with additional studies (eg, urinary recovery)	1/1/2023	4/24/2023	
78018	Thyroid carcinoma metastases imaging; whole body	1/1/2023	4/24/2023	
78020	Thyroid carcinoma metastases uptake (List separately in addition to code for primary procedure)	1/1/2023	4/24/2023	
78070	Parathyroid planar imaging (including subtraction, when performed);	1/1/2023	4/24/2023	
78071	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)	1/1/2023	4/24/2023	
78072	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computed tomography (Canatomical localization	1/1/2023 T) for	4/24/2023	
78075	Adrenal imaging, cortex and/or medulla	1/1/2023	4/24/2023	
78102	Bone marrow imaging; limited area	1/1/2023	4/24/2023	
78103	Bone marrow imaging; multiple areas	1/1/2023	4/24/2023	
78104	Bone marrow imaging; whole body	1/1/2023	4/24/2023	
78185	Spleen imaging only, with or without vascular flow	1/1/2023	4/24/2023	
78195	Lymphatics and lymph nodes imaging	1/1/2023	4/24/2023	
78201	Liver imaging; static only	1/1/2023	4/24/2023	
78202	Liver imaging; with vascular flow	1/1/2023	4/24/2023	
78215	Liver and spleen imaging; static only	1/1/2023	4/24/2023	
78216	Liver and spleen imaging; with vascular flow	1/1/2023	4/24/2023	
78226	Hepatobiliary system imaging, including gallbladder when present;	1/1/2023	4/24/2023	

1/1/2023

1/1/2023

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4/24/2023

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performed

Salivary gland imaging;

Esophageal motility

Gastric mucosa imaging

Gastroesophageal reflux study

Salivary gland function study

Salivary gland imaging; with serial images

Gastric emptying imaging study (eg, solid, liquid, or both);

Hepatobiliary system imaging, including gallbladder when present; with

pharmacologic intervention, including quantitative measurement(s) when

Carelon Medical Benefits Management Program Prior Authorization List-Blue Medicare	1st quarter 2025

	Carelon Medical Benefits Management Program Prior Auth	orization List-l	Blue Medicare 1	st quarter 2025
Code 78265	Description Gastric emptying imaging study (eg,solid, liquid, or both); with small bowel transit	Notice Date 1/1/2023	Effective Date 4/24/2023	Ineffective Date
78266	Gastric emptying imaging study (eg, solid, liquid, or both); with small bowel and colon transit, multiple days	1/1/2023	4/24/2023	
78278	Acute gastrointestinal blood loss imaging	1/1/2023	4/24/2023	
78290	Intestine imaging (eg, ectopic gastric mucosa, Meckel's localization, volvulus)	1/1/2023	4/24/2023	
78291	Peritoneal-venous shunt patency test (eg, for LeVeen, Denver shunt)	1/1/2023	4/24/2023	
78300	Bone and/or joint imaging; limited area	1/1/2023	4/24/2023	
78305	Bone and/or joint imaging; multiple areas	1/1/2023	4/24/2023	
78306	Bone and/or joint imaging; whole body	1/1/2023	4/24/2023	
78315	Bone and/or joint imaging; 3 phase study	1/1/2023	4/24/2023	
78429	PET myocardial, metabolic evaluation with concurrent CT	1/1/2023	4/24/2023	
78430	PET myocardial, perfusion, single study with concurrent CT	1/1/2023	4/24/2023	
78431	PET myocardial, perfusion, multiple studies, with concurrent CT	1/1/2023	4/24/2023	
78432	PET myocardial combined perfusion with metabolic evaluation study	1/1/2023	4/24/2023	
78433	PET myocardial combined perfusion with metabolic evaluation study with concurrent CT	1/1/2023	4/24/2023	
78434	PET myocardial Absolute quantitation of myocardial blood flow (AQMBF)	1/1/2023	4/24/2023	
78445	Non-cardiac vascular flow imaging (ie, angiography, venography)	1/1/2023	4/24/2023	
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	1/1/2023	4/24/2023	
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/orstress	1/1/2023	4/24/2023	
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)	1/1/2023	4/24/2023	
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)	1/1/2023	4/24/2023	
78456	Acute venous thrombosis imaging, peptide	1/1/2023	4/24/2023	

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Code 78457	Description Venous thrombosis imaging, venogram; unilateral	Notice Date 1/1/2023	Effective Date 4/24/2023	Ineffective Date
78458	Venous thrombosis imaging, venogram; bilateral	1/1/2023	4/24/2023	
78459	PET myocardial, metabolic evaluation	1/1/2023	4/24/2023	
78466	Planar, infarct avid; qualitative or quantitative	1/1/2023	4/24/2023	
78468	Planar, infarct avid; with ejection fraction by first pass technique	1/1/2023	4/24/2023	
78469	SPECT, infarct avid; with or w/o quantification	1/1/2023	4/24/2023	
78472	Gated equilibrium; planar, single study, wall motion plus	1/1/2023	4/24/2023	
78473	Gated equilibrium; planar, multiple studies, wall motion study plus ejection fraction	1/1/2023	4/24/2023	
78481	First pass tech; single study, wall motion study plus ejection fraction	1/1/2023	4/24/2023	
78483	First pass tech; multiple studies, wall motion study plus ejection fraction	1/1/2023	4/24/2023	
78491	PET myocardial, perfusion, single study	1/1/2023	4/24/2023	
78492	PET myocardial, perfusion, multiple studies	1/1/2023	4/24/2023	
78494	Gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction	1/1/2023	4/24/2023	
78579	Pulmonary ventilation imaging (eg, aerosol or gas)	1/1/2023	4/24/2023	
78580	Pulmonary perfusion imaging (eg, particulate)	1/1/2023	4/24/2023	
78582	Pulmonary ventilation (eg, aerosol or gas) and perfusion imaging	1/1/2023	4/24/2023	
78496	Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique	1/1/2023	4/24/2023	
78597	Quantitative differential pulmonary perfusion, including imaging when performed	1/1/2023	4/24/2023	
78598	Quantitative differential pulmonary perfusion and ventilation (eg, aerosol or gas),including imaging when performed	1/1/2023	4/24/2023	
78600	Brain imaging, less than 4 static views;	1/1/2023	4/24/2023	
78601	Brain imaging, less than4 static views; with vascular flow	1/1/2023	4/24/2023	
78605	Brain imaging, minimum 4 static views;	1/1/2023	4/24/2023	
78606	Brain imaging, minimum 4 static views; with vascular flow	1/1/2023	4/24/2023	
78608	PET brain, metabolic evaluation	1/1/2023	4/24/2023	
78610	Brain imaging, vascular flow only	1/1/2023	4/24/2023	
78630	Cerebrospinal fluid flow, imaging (not including introduction of material); Cisternography	1/1/2023	4/24/2023	

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Code 78635	Description Cerebrospinal fluid flow, imaging (not including introduction of material); ventriculography	Notice Date 1/1/2023	Effective Date 4/24/2023	Ineffective Date
78645	Cerebrospinal fluid flow, imaging (not including introduction of material); shunt evaluation	1/1/2023	4/24/2023	
78650	Cerebrospinal fluid leakage detection and localization	1/1/2023	4/24/2023	
78660	Radiopharmaceutical dacryocystography	1/1/2023	4/24/2023	
78700	Kidney imaging morphology;	1/1/2023	4/24/2023	
78701	Kidney imaging morphology; with vascular flow	1/1/2023	4/24/2023	
78707	Kidney imaging morphology; with vascular flow and function, single study Without pharmacological intervention	1/1/2023	4/24/2023	
78708	Kidney imaging morphology; with vascular flow and function, single study, with pharmacological intervention (eg, angiotensin converting enzyme inhib diuretic)	1/1/2023 nitor and/or	4/24/2023	
78709	Kidney imaging morphology; with vascular flow and function, multiple studies, with and without pharmacological intervention (eg, angiotensin converting enzyme inhibitor and/or diuretic)	1/1/2023	4/24/2023	
78725	Kidney function study, non-imaging radioisotopic study	1/1/2023	4/24/2023	
78730	Urinary bladder residual study (List separately in addition to code for primary procedure)	1/1/2023	4/24/2023	
78740	Ureteral reflux study(radiopharmaceutical voiding cystogram)	1/1/2023	4/24/2023	
78761	Testicular imaging with vascular flow	1/1/2023	4/24/2023	
78800	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and be pool imaging, when performed); planar, single limited area (includes vascular and blood pool imaging, when performed); planar, single (includes vascular and blood pool imaging, when performed); planar, single	r flow	4/24/2023	
78801	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, 2 or more multiple areas (eg, abdomen and pelvis, head and chest), 1 or more days imaging or single area imaging over 2 or more days	1/1/2023	4/24/2023	
78802	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, whole body, single day imaging	1/1/2023	4/24/2023	
78803	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT), single area (egneck, chest, pelvis), single day imaging	1/1/2023 g, head,	4/24/2023	

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Code 78804	Description Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, whole body, requiring 2 or more days imaging	Notice Date 1/1/2023	Effective Date 4/24/2023	Ineffective Date	
78811	PET tumor imaging, limited	1/1/2023	4/24/2023		
78812	PET tumor imaging, skull base to mid-thigh	1/1/2023	4/24/2023		
78813	PET tumor imaging, whole body	1/1/2023	4/24/2023		
78814	PET tumor imaging with concurrent CT, limited	1/1/2023	4/24/2023		
78815	PET tumor imaging with concurrent CT, skull to midthigh	1/1/2023	4/24/2023		
78816	PET tumor imaging with concurrent CT, whole body	1/1/2023	4/24/2023		
78830	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, single area (eg, head, neck, chest, pelvis), single day imaging	1/1/2023	4/24/2023		
78831	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT) minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days	1/1/2023 ,	4/24/2023		
78832	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days	1/1/2023	4/24/2023		
0042T	Cerebral perfusion analysis using computed tomography with contrast administration, including postprocessing of parametric maps with determination of cerebral blood flow, cerebral blood volume, and mean transit time	1/1/2023	4/24/2023		
0633T	CT, breast, including 3D rendering, when performed, unilateral; w/o contrast	1/1/2023	4/24/2023		
0634T	CT, breast, including 3D rendering, when performed, unilateral; with contrast	1/1/2023	4/24/2023		
0635T	CT, breast, including 3D rendering, when performed, unilateral; w/o contrast, followed by contrast	1/1/2023	4/24/2023		
0636T	CT, breast, including 3D rendering, when performed bilateral; w/o contrast	1/1/2023	4/24/2023		

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Code	Description	Notice Date	Effective Date	Ineffective Date	
0637T	CT, breast, including 3D rendering, when performed, bilateral; with contrast	1/1/2023	4/24/2023		
0638T	CT, breast, including 3D rendering, when performed, bilateral; w/o contrast, followed by contrast	1/1/2023	4/24/2023		
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	1/1/2023	4/24/2023		
0649T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data	1/1/2023	4/24/2023		

preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) (List separately in addition to code for primary procedure