

# Horizon Blue Cross Blue Shield of New Jersey Cardiology Imaging Program & Radiology/Imaging Services Program

## Procedure Code Listing

eviCore healthcare performs Prior Authorization/Medical Necessity Determination (PA/MND) for the codes listed below as part of our Cardiology Imaging Program and Radiology/Imaging Services Program.

<b>CT</b>	0633T, 0634T, 0635T, 0636T, 0637T, 0638T, 70450, 70460, 70470, 70480, 70481, 70482, 70486, 70487, 70488, 70490, 70491, 70492, 71250, 71260, 71270, 71271, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72192, 72193, 72194, 73200, 73201, 73202, 73700, 73701, 73702, 74150, 74160, 74170, 74176, 74177, 74178, 74261, 74262, 74263, 76376, 76377, 76380, G0297, S8092
<b>CTA</b>	70496, 70498, 71275, 72191, 73206, 73706, 74174, 74175, 75635
<b>Cardiac CT</b>	0501T, 0502T, 0503T, 0504T, 75571, 75572, 75573, 75574
<b>MRI</b>	0609T, 0610T, 0611T, 0612T, 70336, 70540, 70542, 70543, 70551, 70552, 70553, 70554, 70555, 71550, 71551, 71552, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72157, 72158, 72195, 72196, 72197, 73218, 73219, 73220, 73221, 73222, 73223, 73718, 73719, 73720, 73721, 73722, 73723, 74181, 74182, 74183, 74712, 74713, 76390, 76391, 77021, 77022, 77046, 77047, 77048, 77049, 77084, C8903, C8905, C8906, C8908, S8037, S8042
<b>MRA</b>	70544, 70545, 70546, 70547, 70548, 70549, 71555, 72159, 72198, 73225, 73725, 74185, C8900, C8901, C8902, C8909, C8910, C8911, C8912, C8913, C8914, C8918, C8919, C8920, C8931, C8932, C8933, C8934, C8935, C8936
<b>Cardiac MRI</b>	75557, 75559, 75561, 75563, C9762, C9763
<b>Nuclear Medicine</b>	78012, 78013, 78014, 78015, 78016, 78018, 78020, 78070, 78071, 78072, 78075, 78102, 78103, 78104, 78185, 78195, 78201, 78202, 78215, 78216, 78226, 78227, 78230, 78231, 78232, 78258, 78261, 78262, 78264, 78265, 78266, 78278, 78282, 78290, 78291, 78300, 78305, 78306, 78315, 78579, 78580, 78582, 78597, 78598, 78600, 78601, 78605, 78606, 78610, 78630, 78635, 78645, 78650, 78660, 78700, 78701, 78707, 78708, 78709, 78725, 78730, 78740, 78761, 78800, 78801, 78802, 78803, 78804, 78830, 78831, 78832, S8080
<b>Nuclear Cardiac Imaging</b>	78414, 78428, 78445, 78451, 78452, 78453, 78454, 78456, 78457, 78458, 78466, 78468, 78469, 78472, 78473, 78481, 78483, 78494, 78496
<b>PET Scans</b>	78429, 78430, 78431, 78432, 78433, 78434, 78459, 78491, 78492, 78608, 78609, 78811, 78812, 78813, 78814, 78815, 78816, G0219, G0235, G0252, S8085
<b>Cardiac</b>	93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461
<b>Echocardiograms</b>	93303, 93304, 93306, 93307, 93308, 93350, 93351, C8922, C8923, C8924, C8928, C8929, C8930
<b>Unlisted Codes</b>	76497, 76498, 76499, 78099, 78199, 78299, 78399, 78499, 78599, 78799, 78999

### Notes:

- eviCore will perform PA/MND of procedure codes 0633T, 0634T, 0635T, 0636T, 0637T, 0638T, 71271 for services provided on or after March 25, 2021.
- Coding Note: C-Codes are for facility/hospital use only (only for UB04 claims submission).

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eviCore healthcare is an independent company that supports Horizon Blue Cross Blue Shield of New Jersey in the provision of Prior Authorization and/or Medical Necessity Review (PA/MND) of certain nonemergency radiology services.

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