

interChange Provider Important Message

Attention: Physicians, Advanced Practice Registered Nurses (APRN), Physician Assistants (PA), Chiropractors, Certified Nurse-Midwives (CNM), Independent Radiology Centers and Outpatient Hospitals

Prior Authorization Requirements for Advanced Imaging Services Reminder in an Outpatient Hospital Setting

As a reminder, effective January 1, 2017, when certain radiology services are performed in an outpatient hospital setting, the ordering provider must request authorization using the corresponding Healthcare Common Procedure Coding System (HCPCS) "C" code instead of the Current Procedural Terminology (CPT) code. Hospitals should confirm that a valid, approved authorization is on file for the appropriate "C" code prior to performing the service. Please reference Provider Bulletin 2016-70 - "Important Changes to the Radiology Benefit Management Program" for a list of CPT codes that have a corresponding "C" HCPCS code.

Outpatient Hospitals must confirm that a valid, approved authorization is on file for the appropriate "C" code. If the authorization on file doesn't have a "C" code the outpatient claim will deny and the hospital would need to contact Community Health Network of CT (CHNCT) at 1-800-440-5071 for assistance.