

Connecticut Department of Social Services Medical Assistance Program

Provider Bulletin 2023-37

www.ctdssmap.com

TO: Outpatient Hospitals

RE: Addition of Prior Authorization on Select Radiology Procedure Codes

Effective for dates of service May 1, 2023, and forward, consistent with existing authorization requirements for physician and independent radiologists, the Department of Social Services (DSS) is adding prior authorization (PA) to the following procedure codes for outpatient hospitals:

Procedure Code	Description
77046	MRI breast, without
	contrast material,
	unilateral
77047	MRI breast without
	contrast material,
	bilateral

The outpatient hospital PA grid has been updated to add procedure codes 77046 and 77047. The outpatient hospital PA grid can be accessed via the www.ctdssmap.com Web site by selecting the "Hospital Modernization" web page. The prior authorization grid for Outpatient Hospitals is located under "Important Messages – Connecticut Hospital Modernization".

For questions related to the radiology prior authorization process, contact eviCore healthcare at 1-800-440-5071 and follow the prompts to *Radiology Authorizations*.

