

**QualChoice Health Insurance
Utilization Review Matrix 2024
Dillard’s Inc. Members**

The matrix below contains the CPT-4 codes for which Evolent (formerly National Imaging Associates, Inc.) authorizes on behalf of QualChoice Health Insurance. This matrix is designed to assist in the resolution of claims adjudication and claims questions related to those services authorized by Evolent. The “Allowable Billed Groupings” is meant to outline that if a given procedure is authorized, that any one of the listed procedure codes could be submitted on a claim representing that service. This assumes that the member is eligible at the time of the service, that appropriate re-bundling rules are applied, that the claim includes an appropriate diagnosis code for the CPT code and that the service is performed within the validity period.

If a family of CPT codes is not listed in this matrix, an exact match is required between the authorized CPT code and the billed CPT code. If the exact match does not occur, the charge should be adjudicated accordingly.

***Please note: Services rendered in an Emergency Room, Observation, Surgery Center or Hospital Inpatient setting are not managed by Evolent.**

Authorized CPT Code	Description	Allowable Billed Groupings
70336	MRI Temporomandibular Joint	70336
70540	MRI Orbit, Face, Neck and/or Internal Auditory Canal	70540, 70542, 70543, +0698T
70544	MRA Head	70544, 70545, 70546
70547	MRA Neck	70547, 70548, 70549
70551	MRI Brain (with or without Internal Auditory Canal views)	70551, 70552, 70553, +0698T
70554	Functional MRI Brain	70554, 70555
71550	MRI Chest	71550, 71551, 71552, +0698T
71555	MRA Chest (excluding myocardium)	71555
72141	MRI Cervical Spine	72141, 72142, 72156, +0698T
72146	MRI Thoracic Spine	72146, 72147, 72157, +0698T
72148	MRI Lumbar Spine	72148, 72149, 72158, +0698T
72159	MRA Spinal Canal	72159
72196	MRI Pelvis	72195, 72196, 72197, +0698T
72198	MRA Pelvis	72198
73220	MRI Upper Extremity, other than Joint	73218, 73219, 73220, +0698T
73221	MRI Upper Extremity Joint	73221, 73222, 73223, +0698T
73225	MRA Upper Extremity	73225

Authorized CPT Code	Description	Allowable Billed Groupings
73720	MRI Lower Extremity	73718, 73719, 73720, 73721, 73722, 73723, +0698T
73721	MRI Hip	72195, 72196, 72197, 73721, 73722, 73723, +0698T
73725	MRA Lower Extremity	73725
74181	MRI Abdomen	74181, 74182, 74183, S8037, +0698T, +0724T
74185	MRA Abdomen	74185
75557	MRI Heart	75557, 75559, 75561, 75563, +75565,+0698T
76390	MR Spectroscopy	76390, +0698T
76498	Unlisted Magnetic Resonance Procedure	76498, +0698T
77046	MRI Breast	77046, 77047, 77048, 77049, +0698T
77084	MRI Bone Marrow	77084
78429	Heart PET Scan with CT for Attenuation	78459, 78491, 78492, +78434, 78429, 78430, 78431, 78432, 78433
78459	Heart PET Scan	78459, 78491, 78492, +78434
78608	PET Scan, Brain	78608, 78609
78813	PET Scan	78811, 78812, 78813, 78814, 78815, 78816
78816	PET Scan with concurrently acquired CT for attenuation correction and anatomic, localization.	78811, 78812, 78813, 78814, 78815, 78816
S8037	MR Cholangiopancreatography	S8037, 74181, 74182, 74183
S8042	MRI low field	S8042

Payment for + (add on codes) may depend upon the appropriateness of the application of such codes related to the approved primary code.