



January 18, 2019

Web Announcement 1813

## **UPDATE: Claims for Radiology Scans Automatically Reprocessed**

Update to [Web Announcement 1692](#): The prior authorization (PA) requirement for medically necessary Magnetic Resonance Imaging (MRI), Magnetic Resonance Angiography (MRA), Magnetic Resonance Spectroscopy (MRS) and Positron Emission Tomography (PET) scans was effective November 1, 2018. Effective on claims with dates of service on or after November 1, 2018, PA is required for medically necessary MRI, MRA, MRS and PET scans.

The PA requirement applies to provider types (PTs) 12 (Hospital, Outpatient), 20 (Physician, M.D., Osteopath, D.O.), 22 (Dentist), 24 (Advanced Practice Registered Nurse), 27 (Radiology and Non-Invasive Diagnostic Centers) and 77 (Physician's Assistant).

Claims submitted by PTs 12, 20, 22, 24, 27 and 77 for radiology scans with dates of service August 1, 2018, through October 31, 2018, and processed prior to December 19, 2018, that denied in error with edit code 0155 (Prior authorization required) have been automatically reprocessed to adjudicate correctly. Results of the reprocessed claims appear on remittance advices dated January 25, 2019.

Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received.