



## Gold Card Expedited Authorization Program

Highmark – Medical Society of Delaware  
and Delaware Health Care Association  
Gold Card Discussion



## Expedited Prior Auth (Gold Carding) Program Overview

As heightened expectations to simplify the prior authorization experience emerged with the release of the 2018 Consensus Statement and to support our Living Health Strategy, the “Expedited Prior Auth” (Gold Card) Program was developed.



Industry trends, mandates, and pressure from multiple constituents created the need for health plans to reconsider the prior authorization process to recognize high-performing providers to:

- Promote a differentiated utilization management experience with quicker decisioning while reducing the overall administrative burden for providers who consistently demonstrate adherence to clinical guidelines



## Expedited Prior Auth (Gold Carding) Program Benefits

---

### Benefits to Providers

- Streamlined workflow
- Members can move forward in their recommended treatment plan without delay
- Reduction in auth preparation time without requirement for clinical documentation
- Reduction in time to appeal auth denials
- Reduction in physician time for peer-to-peer reviews
- Administrative task reduction
- Access can be integrated with already existing NaviNet access



## Expedited Prior Auth (Gold Carding) 2022 Network Wide (Scaled) Program Approach

---

### **Network Wide (Scaled) Gold Card Program – Implemented January 1, 2022**

- PA/DE
- Commercial Fully Insured and Medicare Advantage
- Three modalities: CT, MR, ECHO and three codes: outpatient total hip replacement, outpatient total knee replacement, and pain injections (same as pilot)
- Minimum 25 procedures per modality per year /  $\geq$  99% approval rate over 12-month period (Q2 2020 – Q1 2021 claims)

#### *Note:*

*Final 2023 Program specifics may vary slightly from what is presented today. Ex-minimum volume requirements will likely be reduced or removed. The number of providers to be impacted and any proposed changes to the 2023 program will be evaluated in Q3 2022.*

# Provider Facing Analytics Platform





## Provider Facing Analytics Platform

---

### Purpose of Tool

#### Insight into Utilization Management Performance:

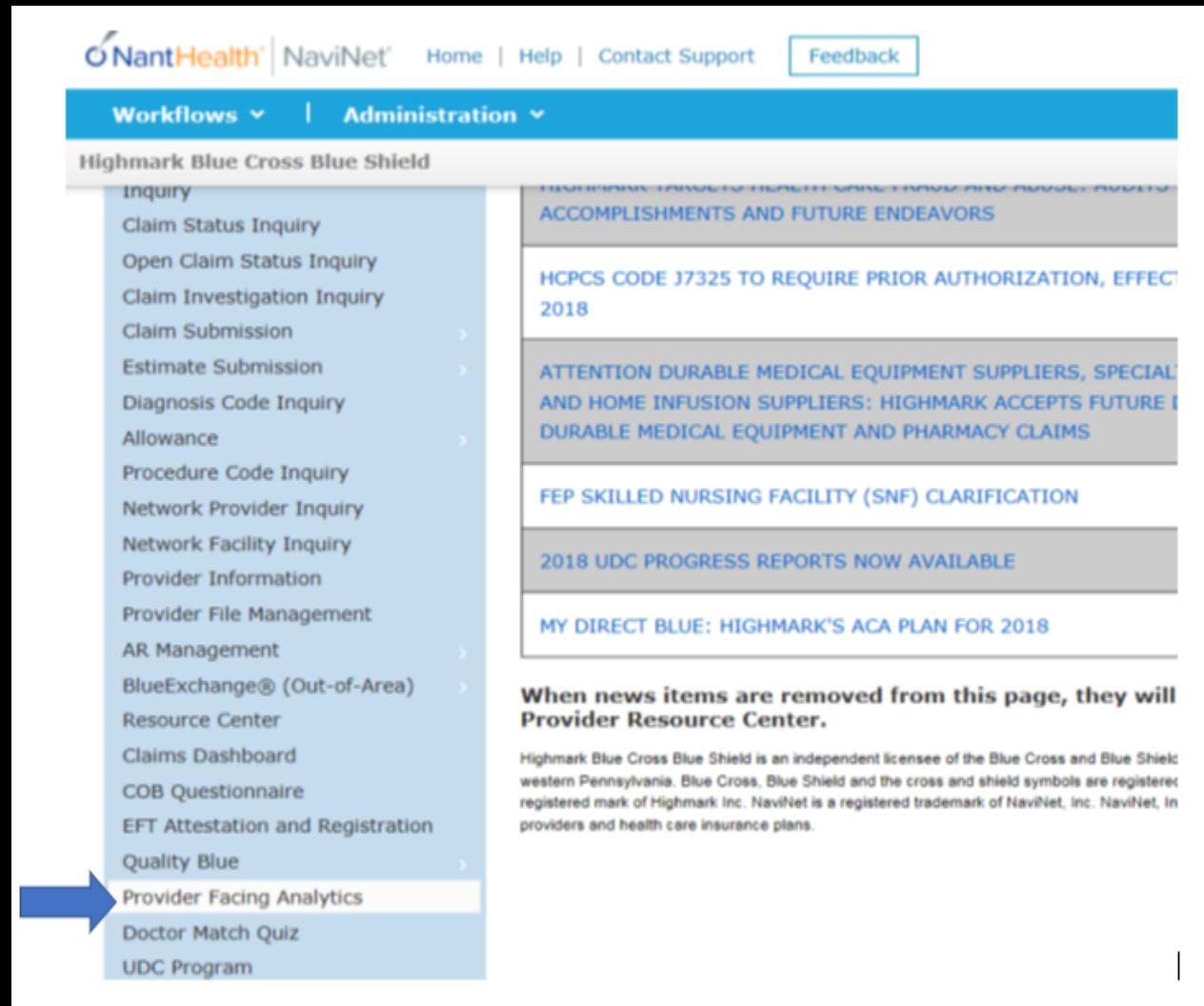
- Information at Provider Level
  - (Practice level under development)
- Volume of authorization requests & Requestor details
  - Approvals
  - Denials
    - Reason for denial

#### Currently contains performance information on:

- MRIs
- CTs
- ECHOs
- Elective Joints (outpatient Hips and Knees)
- Pain Injections

# The PFA Platform may be accessed via NaviNet

The Authorization Performance Dashboard can be accessed via single sign-on using your NaviNet logon credentials. On the left navigation bar, after obtaining access, you would select Provider Facing Analytics (PFA). You will then be routed into the Authorization Performance app.



The screenshot shows the NantHealth NaviNet interface. At the top, there is a navigation bar with the NantHealth logo, 'NaviNet', and links for 'Home', 'Help', 'Contact Support', and 'Feedback'. Below the navigation bar is a blue header bar with 'Workflows' and 'Administration' dropdowns. The main content area is titled 'Highmark Blue Cross Blue Shield'. On the left, a navigation menu is displayed under the 'Inquiry' heading, listing various options like 'Claim Status Inquiry', 'Open Claim Status Inquiry', and 'Claim Submission'. A blue arrow points to the 'Provider Facing Analytics' option in this menu. To the right of the menu, there is a sidebar with several news items: 'ACCOMPLISHMENTS AND FUTURE ENDEAVORS', 'HCPCS CODE J7325 TO REQUIRE PRIOR AUTHORIZATION, EFFECT 2018', 'ATTENTION DURABLE MEDICAL EQUIPMENT SUPPLIERS, SPECIAL AND HOME INFUSION SUPPLIERS: HIGHMARK ACCEPTS FUTURE DURABLE MEDICAL EQUIPMENT AND PHARMACY CLAIMS', 'FEP SKILLED NURSING FACILITY (SNF) CLARIFICATION', '2018 UDC PROGRESS REPORTS NOW AVAILABLE', and 'MY DIRECT BLUE: HIGHMARK'S ACA PLAN FOR 2018'. At the bottom of the sidebar, there is a note: 'When news items are removed from this page, they will be moved to the Provider Resource Center.' Below the sidebar, there is a small note: 'Highmark Blue Cross Blue Shield is an independent licensee of the Blue Cross and Blue Shield Association. Blue Cross, Blue Shield and the cross and shield symbols are registered trademarks of the Blue Cross and Blue Shield Association. Highmark is a registered trademark of Highmark Inc. NaviNet is a registered trademark of NaviNet, Inc. NaviNet, Inc. is not affiliated with the Blue Cross and Blue Shield Association or the Blue Cross and Blue Shield Foundation of America. © 2017 Highmark Inc. All rights reserved.'

# Summary | Landing Page

Authorization Performance   Resources   KEVIN BOYLES | App: AUTHP 

Auth. Submission Date Start: 01/01/2022

Auth. Submission Date End: 09/20/2022

Refresh Filters

State: 1 Item(s) Selected

Health System: -- All --

Physician Specialty: -- All --

Line of Business: -- All --

Program: -- All --

Modality: -- All --

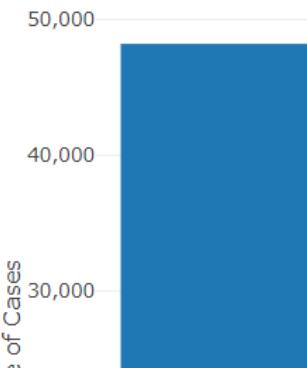
Panel Case ID (OPT)

Summary   Detail   Specialty Comparison

### Authorization Performance

State: DE

	Total	Approvals	Denials	Partially Approved	Appeals	Overtures	Denials Upheld	Other
Rate	100%	87.89%	11.73%	.38%	.22%	.16%	.06%	N/A
Total Requests	61,307	48,206	6,431	209	120	87	31	6,461



# Detail Tab

Auth. Submission Date Start: 01/01/2022

Auth. Submission Date End: 09/20/2022

**Refresh Filters**

State: 1 Item(s) Selected

Health System: -- All --

Physician Specialty: -- All --

Line of Business: -- All --

Program: -- All --

Modality: -- All --

Procedure Code: -- All --

Provider: -- All --

Provider NPI: -- All --

Gold Carded Provider: -- All --

Program: -- All --

Modality: -- All --

Health System: -- All --

CPT Code: -- All --

Episode ID: -- All --

Authorization Performance

State: DE

Metric Selection: --All--

Provider	Provider NPI	Gold Carded Provider	Program	Modality	Health System	CPT Code	Episode ID
A		Not Gold Carded	MSK	SpineSurgery		E0748	
A		Not Gold Carded	Radiology	CT	Union Hospital of Cecil County	71250	
A		Not Gold Carded	Radiology	CT	Union Hospital of Cecil County	71275	
A		Not Gold Carded	RADIOLOGY	CT	Union Hospital of Cecil County	71250	
A		Not Gold Carded	Cardiology	TRANSTHORACIC ECHO	Union Hospital of Cecil County	93306	
A		Not Gold Carded	Radiology	CT	Union Hospital of Cecil County	71250	
A		Not Gold Carded	Radiology	CT	Union Hospital of Cecil County	71250	
A		Not Gold Carded	Radiology	CT	Union Hospital of Cecil County	71250	

# Detail Export

Gold Carded Provider	Program	Modality	Health System	CPT Code	Episode ID	Case Init	Patient ID	DOB	Request Date	Decision Date	Gold Card Auth	Line of Business	Decision	Detail Denial Reason	Denial Reason	Full Denial Reason	Diagnosis Code	Diagnosis Description	Auth Creator
MSK	SpineSurge			E0748		IVR			08/11/2022 10:8/11/2022 10:15 No		COMMERCIAL-Fully Approval					298.1	Arthrodesis status		
Radiology	CT	Union Hospital	of 71275			Web			04/01/2022 08:3/4/2022 8:37 A No		COMMERCIAL-Fully Approval					A06.2	Amebic nondysenteric		
RADIOLOGY ADVANCED	I	Union Hospital	of 71250			Fax			06/03/2022 01:5/6/2022 3:08 P No		MEDICAID	Denial	Based on eviCore Chest Clinical history a			J98.4	Other disorders of lung		
Radiology	CT	Union Hospital	of 71250			Web			03/15/2022 12:3/18/2022 6:32 No		COMMERCIAL-Fully Denial	Based on eviCore Chest Clinical history a			J45.50	Severe persistent asthma			
Radiology	CT	Union Hospital	of 71250			Web			03/25/2022 12:3/31/2022 9:30 No		MEDICAID	Denial	Based on eviCore Clinic Clinical history a			J98.4	Other disorders of lung		
RADIOLOGY	CT	Union Hospital	of 71250			Web			07/27/2022 11:4/8/2022 7:55 A No		COMMERCIAL-Fully Approval				R68.89	Other general symptom			
Radiology	CT	Union Hospital	of 71250			Web			02/23/2022 01:5/3/22/2022 3:29 No		COMMERCIAL-ASO Approval		Clinical history a		R06.02	Shortness of breath			
Cardiology	TRANSTHOR	Union Hospital	of 93306			Web			04/25/2022 10:1/4/25/2022 10:25 No		COMMERCIAL-Fully Approval				I10	Essential (primary) hypertension			
Radiology	CT	Union Hospital	of 71250			Web			02/23/2022 01:5/2/28/2022 6:37 No		COMMERCIAL-ASO Denial	Based on eviCore Chest Clinical history a			R06.02	Shortness of breath			
Radiology	CT	Union Hospital	of 71250			Phone			01/14/2022 11:5/1/18/2022 4:01 No		COMMERCIAL-Fully Approval				R68.89	Other general symptom			
Cardiology	TRANSTHOR		93306			Web			01/07/2022 04:1/7/2022 4:03 P No		COMMERCIAL-ASO Expired				R55	Syncope and collapse			
RADIOLOGY	CT		74177			Phone			08/18/2022 09:1/8/18/2022 9:27 No		COMMERCIAL-ASO Expired				R11.10	Vomiting, unspecified			
RADIOLOGY	MR		70553			Web			06/28/2022 11:5/6/28/2022 11:52 No		COMMERCIAL-Fully Approval				G93.89	Other specified disorder			
RADIOLOGY	NUCLEAR	MR	78072			Web			08/23/2022 11:5/8/23/2022 12:01 No		COMMERCIAL-Fully Approval				E21.3	Hyperparathyroidism, primary			
RADIOLOGY	CT		74177			Phone			08/04/2022 10:5/8/4/2022 10:58 No		COMMERCIAL-ASO Expired				Z00.8	Encounter for other general condition			
RADIOLOGY	CT		74177			Web			09/08/2022 09:1/9/12/2022 2:31 No		COMMERCIAL-ASO Approval				K51.00	Ulcerative (chronic) perirectal disease			
RADIOLOGY	MR	Alfred I duPont H	70553			IVR			06/16/2022 03:4/6/16/2022 3:46 No		MEDICAID	Approval			H90.3	Sensorineural hearing loss			
Radiology	MR	Alfred I duPont H	70543			Web			03/25/2022 09:3/25/2022 9:41 No		MEDICAID	Approval			R04.0	Epistaxis			
CARDIOLOG	DIAGNOSTIC		93460			Phone			08/10/2022 09:1/8/10/2022 9:23 No		COMMERCIAL-ASO Approval				R93.1	Abnormal findings on chest x-ray			
RADIOLOGY	MR		72141			Web			06/09/2022 04:5/6/9/2022 4:57 P No		COMMERCIAL-ASO Approval				R26.81	Unsteadiness on feet			
RADIOLOGY	ADVANCED	I	72148			Web			06/06/2022 03:4/6/6/2022 3:45 P No		COMMERCIAL-ASO Approval				M21.372	Foot drop, left foot			
Radiology	MR		72141			Web			05/05/2022 08:4/5/5/2022 8:45 A No		COMMERCIAL-Fully Approval				M48.02	Spinal stenosis, cervical			
RADIOLOGY	ADVANCED	I	73721			Web			05/27/2022 08:4/5/30/2022 1:56 No		MEDICAID	Approval			M25.562	Pain in left knee			
RADIOLOGY	MR		72148			Web			07/06/2022 10:4/7/6/2022 10:41 No		COMMERCIAL-Fully Approval				M54.42	Lumbago with sciatica, left			
Radiology	MR		73721			Web			04/07/2022 10:4/8/2022 1:30 P No		MEDICAID	Approval			M25.562	Pain in left knee			
CARDIOLOG	TRANSTHOR		93306			Web			08/12/2022 02:4/8/12/2022 2:43 No		MEDICAID	Approval			R00.1	Bradycardia, unspecified			
RADIOLOGY	CT		71260			Web			09/14/2022 09:1/9/14/2022 9:14 No		COMMERCIAL-Fully Approval				R07.89	Other chest pain			
Radiology	MR		72197			Web			01/12/2022 03:1/12/2022 3:32 No		MEDICAID	Approval			N82.3	Fistula of vagina to larynx			
RADIOLOGY	MR		72141			Web			06/16/2022 10:5/6/16/2022 10:55 No		MEDICAID	Approval			M47.22	Other spondylosis with or without spondylolisthesis			
Radiology	MR		70553			Web			02/24/2022 09:3/2/24/2022 9:39 No		MEDICAID	Approval			R47.1	Dysarthria and anarthria			
Radiology	MR		77049			Web			05/06/2022 10:4/5/6/2022 10:40 No		COMMERCIAL-ASO Approval				D05.01	Lobular carcinoma in situ			
Radiology	MR		72141			Web			01/12/2022 03:4/1/12/2022 3:43 No		MEDICAID	Approval			S16.1XXS	Strain of muscle, fascia			
Radiology	MR		73721			Web			03/16/2022 11:3/3/22/2022 12:19 No		MEDICAID	Partially At EpisodeID:A169161939	Clinical history a		M79.671	Pain in right foot			
Radiology	CT		70450			Web			05/05/2022 12:4/5/5/2022 12:41 No		COMMERCIAL-ASO Approval				G43.109	Migraine with aura, no aura			
Radiology	CT		74176			Web			05/09/2022 10:15/10/2022 12:25 No		COMMERCIAL-ASO Approval				R31.9	Hematuria, unspecified			
CARDIOLOG	TRANSTHOR		93306			Web			08/26/2022 11:5/8/26/2022 11:52 No		MEDICAID	Approval			R07.9	CHEST PAIN, UNSPECIFIED			

# Export Generation

---

Clicking the export button generates an excel workbook based on the current view (applied filters, authorization outcomes, any specific provider selections). There are 2 tabs in the workbook.

The second tab, labeled “Filters” contain the applied filters:

Auth. Sub	05/25/2022
Auth. Sub	08/25/2022
State	DE
Health Sys	--All--
Physician	--All--
Line of Bu	--All--
Program	--All--
Modality	--All--
Procedure	--All--
Service Se	--All--
Gold Card	Gold Carded Provider For Modality
Gold Card	--All--
Case Initia	--All--
Status	--All--

An orange arrow points from the 'Gold Carded Provider For Modality' cell in the table to a callout box containing the text 'In this example, multiple filters were applied.' Another orange arrow points from the 'State' cell in the table to the same callout box.

In this example, multiple filters were applied.

# Specialty Comparison Tab

Auth. Submission Date Start: 01/01/2022

Auth. Submission Date End: 03/31/2022

Clear All

Generate Report

Summary Detail **Specialty Comparison**

### Authorization Performance

Provider	Provider NPI	Volume	Approval Percentage
Provider 1	Provider NPI 1	30	89%

The orange dot represents the performance of the provider shown in the table above the graph. Hover on the orange dot to see a provider name, provider requests, and provider approval rating.

Scatter plot showing Approval Percentage vs Volume of Cases

Volume of Cases	Approval Percentage
30	90%

# Specialty Comparison Tab - Group View

Auth. Submission Date Start: 01/01/2022

Auth. Submission Date End: 09/20/2022

[Refresh Filters](#)

[Clear All](#)

[Generate Report](#)

Summary Detail **Specialty Comparison**

### Authorization Performance

Provider	Provider NPI	Volume	Approval Percentage
1	1	148	97%
2	2	239	95%
3	3	164	89%
4	4	12	60%
5	5	222	86%
6	6	19	83%
7	7	52	89%
8	8	23	100%

# SUMMARY

## Provider Facing Analytics Tool

- Allows for multiple sorts: Approval Percentage, Denials, Performance Comparisons
- Referral-level/patient-level detail exports

## Decreased Lift/Less Administrative Burden

- More staff time for patient interactions and care
- Less delays in getting patients the tests/images they require

## Education

- Research denials and unnecessary auth requests to improve processes

Thank You  
For Your  
Time

Discussion/Questions??

Next Steps:

- Complete PDF contained within meeting invite or upon receipt from DHA/Med Society Contact and return to Kevin Boyles @ [kevin.boyles@highmarkhealth.org](mailto:kevin.boyles@highmarkhealth.org) AND Jen Rosato @ [jennifer.rosato@highmark.com](mailto:jennifer.rosato@highmark.com) in order to obtain PFA Access
- Providers/Groups that do not yet qualify will be afforded access to the PFA tool to work towards qualifications.

A photograph of a female doctor in a white coat and stethoscope, smiling and interacting with a patient. The image is positioned on the left side of the slide, with a diagonal white line separating it from the text area on the right.

# Appendix – Example listing of Modality Procedures for Potential Inclusion

# MRI Modality Procedure List (96 total)

CPT Code	CPT Name
70336	MRI TMJ
70540	MRI FACE, ORBIT, NECK W/O CONT
70542	MRI FACE, ORBIT, NECK W/ CONTR
70543	MRI FACE, ORBIT, NECK W & W/O
70551	MRI Brain W/O CONTRAST
70552	MRI Brain W/ CONTRAST
70553	MRI Brain W/ & W/O CONTRAST
70554	MRI Brain, functional MRI
70555	MRI Brain, req. phys
71550	MRI CHEST W/O CONTRAST
71551	MRI CHEST W CONTRAST
71552	MRI CHEST W & W/O CONTRAST
72141	MRI CERVICAL SPINE W/O CONTRAS
72142	MRI CERVICAL SPINE W/ CONTRAST
72146	MRI THORACIC SPINE W/O CONTRAS
72147	MRI THORACIC SPINE W/ CONTRAST
72148	MRI LUMBAR SPINE W/O CONTRAST
72149	MRI LUMBAR SPINE W/ CONTRAST
72156	MRI C SPINE W/ & W/O CONTRAST
72157	MRI T SPINE W/ & W/O CONTRAST
72158	MRI L SPINE W/ & W/O CONTRAST
72195	MRI PELVIS W/O CONTRAST
72196	MRI PELVIS W CONTRAST
72197	MRI PELVIS W & W/O CONTRAST
73218	MRI UPPER EXTREMITY W/O CONTRA
73219	MRI UPPER EXTREMITY W CONTRAST
73220	MRI UPPER EXTREMITY W & W/O CO
73221	MRI UPPER EXTREMITY JOINT W/O
73222	MRI UPPER EXTREMITY JOINT W CO
73223	MRI UPPER EXTREMITY JOINT W &
73718	MRI LOWER EXTREMITY W/O CONTRA
73719	MRI LOWER EXTREMITY W CONTRAST

CPT Code	CPT Name
73720	MRI LOWER EXTREMITY W & W/O CO
73721	MRI LOWER EXTREMITY JOINT W/O
73722	MRI LOWER EXTREMITY JOINT W CO
73723	MRI LOWER EXTREMITY JOINT W &
74181	MRI ABDOMEN W/O CONTRAST
74182	MRI ABDOMEN W CONTRAST
74183	MRI ABDOMEN W & W/O CONTRAST
74712	MRI FETAL SNGL/1ST GESTATION
74713	MRI FETAL EA ADDL GESTATION
75557	Heart MRI Structure&Funct WO
75559	Heart MRI W/Stress WO
75561	Heart MRI Structure/Funct WO&W
75563	Heart MRI W/Stress W&WO
75565	CARDIAC MRI VELOCITY FLOW MAP
76390	MRI SPECTROSCOPY
76391	MRE
76498	Unlisted MRI Procedure
77021	MRI GUIDANCE FOR NEEDLE PLACEM
77022	MRI Guidance
77046	MRI BREAST UNILATERAL, wo dye
77047	MRI BREAST BILATERAL, wo dye
77048	MRI BREAST UNILAT wwo dye wCAD
77049	MRI BREAST BILAT wwo dye wCAD
77058	MRI BREAST W/ AND/OR W/O CONTR
77059	MRI BREAST BILATERAL
77084	MRI, bone marrow blood supply
C8903	MRI Breast w/ contrast, uni
C8904	MRI Breast w/o contrast
C8905	MRI Breast w and w/o contrast
C8906	MRI BREAST w/ CONTRAST BI
C8907	MRI BREAST w/o CONTRAST BI
C8908	MRI BREAST BILATERAL

CPT Code	CPT Name
S8037	MR cholangiopancreatography
S8042	MRI Low-Field
70544	MRA HEAD W/O CONTRAST
70545	MRA HEAD W/ CONTRAST
70546	MRA HEAD W & W/O CONTRAST
70547	MRA NECK W/O CONTRAST
70548	MRA NECK W CONTRAST
70549	MRA NECK W & W/O CONTRAST
71555	MRA CHEST (EXC MYOCARDIUM) W/
72159	MRA SPINAL CANAL W/ OR W/O CON
72198	MRA PELVIS W/ OR W/O CONTRAST
73225	MRA UPPER EXTREMITY W/ OR W/O
73725	MRA LOWER EXTREMITY W/ OR W/O
74185	MRA ABDOMEN W/ OR W/O CONTRAST
C8900	MRA Abdomen with contrast
C8901	MRA Abdomen without contrast
C8902	MRA Abdomen with w/o contrast
C8909	MRA chest w/contrast
C8910	MRA chest w/o contrast
C8911	MRA chest
C8912	MRA lower extremity w/ contr
C8913	MRA lower extremity w/o contr
C8914	MRA lower extremity
C8918	MRA pelvis w/ contrast
C8919	MRA pelvis w/o contrast
C8920	MRA pelvis w/ and w/o contrast
C8931	MRA, W/DYE, SPINAL CANAL
C8932	MRA, W/O DYE, SPINAL CANAL
C8933	MRA, W/O&W/DYE, SPINAL CANAL
C8934	MRA, W/DYE, UPPER EXTREMITY
C8935	MRA, W/O DYE, UPPER EXTR
C8936	MRA, W/O&W/DYE, UPPER EXTR

# CT Modality Procedure List (62 total)

CPT Code	CPT Name
0042T	CT PERfusion BRAIN
0159T	CAD, Breast MRI
0501T	FFR-CT (GLOBAL)
0502T	FFR-CT (DATA PREP & TRANS)
0503T	FFR-CT (VENDOR TECH COMPONENT)
0504T	FFR-CT (INTER & REPORT – MD)
70450	CT HEAD/BRAIN W/O CONTRAST
70460	CT HEAD/BRAIN W/ CONTRAST
70470	CT HEAD/BRAIN W/O & W/ CONTRAS
70480	CT ORBIT W/O CONTRAST
70481	CT ORBIT W/ CONTRAST
70482	CT ORBIT W/O & W/ CONTRAST
70486	CT MAXLLFCL W/O CONTRAST
70487	CT MAXLLFCL W/ CONTRAST
70488	CT MAXLLFCL W/O & W/ CONTRAST
70490	CT SOFT TISSUE NECK W/O CONTRA
70491	CT SOFT TISSUE NECK W/ CONTRAS
70492	CT SOFT TISSUE NECK W/O & W/ C
70496	CT ANGIOGRAPHY HEAD
70498	CT ANGIOGRAPHY NECK
71250	CT THORAX W/O CONTRAST
71260	CT THORAX W/ CONTRAST
71270	CT THORAX W/O & W/ CONTRAST

CPT Code	CPT Name
71275	CT ANGIOGRAPHY CHEST
72125	CT C SPINE W/O CONTRAST
72126	CT C SPINE W/ CONTRAST
72127	CT C SPINE W/O & W/ CONTRAST
72128	CT T SPINE W/O CONTRAST
72129	CT T SPINE W/ CONTRAST
72130	CT T SPINE W/O & W/ CONTRAST
72131	CT L SPINE W/O CONTRAST
72132	CT L SPINE W/ CONTRAST
72133	CT L SPINE W/O & W/ CONTRAST
72191	CT ANGIOGRAPHY PELVIS
72192	CT PELVIS W/O CONTRAST
72193	CT PELVIS W/ CONTRAST
72194	CT PELVIS W/O & W/ CONTRAST
73200	CT UPPER EXTREMITY W/O CONTRAS
73201	CT UPPER EXTREMITY W/ CONTRAST
73202	CT UPPER EXTREMITY W/O & W/ CO
73206	CT ANGIOGRAPHY UPPER EXTREMITY
73700	CT LOWER EXTREMITY W/O CONTRAS
73701	CT LOWER EXTREMITY W/ CONTRAST
73702	CT LOWER EXTREMITY W/O & W/ CO
73706	CT ANGIOGRAPHY LOWER EXTREMITY
74150	CT ABDOMEN W/O CONTRAST

CPT Code	CPT Name
74160	CT ABDOMEN W/ CONTRAST
74170	CT ABDOMEN W/O & W/ CONTRAST
74174	CT ANGIO ABD&PELV W/O&W/DYE
74175	CT ANGIOGRAPHY ABDOMEN
74176	CT ABDOMEN & PELVIS W/O
74177	CT ABDOMEN & PELVIS W/
74178	CT ABD & PELV W/O & W CONTRAST
74261	CT COLONOGRAPHY, DIAGNOSTIC
74262	CT COLONOGRAPHY DIAG CONTRAST
74263	CT COLONOGRAPHY, SCREENING
75635	CTA Abd Aorta & BLE Runoff
76380	CT LIMITED OR LOCALIZED FOLLOW
76497	Unlisted ct procedure
77078	CT Bone dnsty, axial skeleton
G0297	LDCT FOR LUNG CA SCREEN
S8092	ELECTRON BEAM CT

# ECHO Modality Procedure List (28 total)

CPT Code	CPT Name	CPT Code	CPT Name
0439T	MYOCARDIAL PERfusion ECHO	93325	ECHO, Doppler Flow
93303	ECHO, COMPLETE CONGENITAL HD	93350	ECHO Stress Test w/o ETT
93304	ECHO, LIMITED CONGENITAL HD	93351	ECHO Stress Test Complete
93306	ECHO, Complete with Doppler	93352	ECHO Stress Test w/contrast
93307	ECHO, 2D, Complete	93356	MYOCARD STRAIN IMAG SPEC TRACK
93308	ECHO, 2D, Limited	C8921	ECHO tran; complete w/contrast
93312	ECHO TRANSESOPHAGEAL	C8922	ECHO Transthoracic; Limited
93313	ECHO TRANSESOPHAGEAL	C8923	ECHO, 2D, Complete
93314	ECHO TRANSESOPHAGEAL	C8924	ECHO, 2D, Limited
93315	ECHO TRANSESOPHAGEAL	C8925	Transesophageal Echo (TEE)
93316	ECHO TRANSESOPHAGEAL	C8926	Transesophageal Echo (TEE)
93317	ECHO TRANSESOPHAGEAL	C8928	TRANSTHORACIC ECHO STRESS
93320	ECHO, Doppler Complete	C8929	ECHO C/W DOPPLER W/CONTRAST
93321	ECHO Doppler Limited	C8930	STRESS ECHO W/ECG ST W/CONTRAS