

2023 Colorado Prior Authorization Report- Aetna Life Insurance Company and Aetna Health Inc. as required by C.R.S. 10-16-112.5 (2)(c)(I)

Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	731	ANESTHESIA UPPER GI ENDOSCOPIC PX NOS	Gastroenterology	2	0		
Outpatient	811	ANESTHESIA LOWER INTST ENDOSCOPIC PX NOS	Gastroenterology	1	0		
Outpatient	812	ANESTHESIA LOWER INTST ENDOSCOPIC PX SCR COLSC	Gastroenterology	2	0		
Outpatient	813	ANESTHESIA COMBINED UPPER&LOWER GI ENDOSCOPIC PX	Gastroenterology	1	0		
Outpatient	11400	EXC B9 LES MRGN XCP SK TG T/A/L 0.5 CM/<	Surgery	1	0		
Outpatient	11402	EXC B9 LES MRGN XCP SK TG T/A/L 1.1-2.0 CM	Surgery, Plastic	1	0		
Outpatient	11441	EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 0.6-1.0CM	Otolaryngology	1	0		
Outpatient	11970	RPLCMT TISS XPNDR PERM IMPLT	Surgery, Plastic and Reconstructive	1	0		
Outpatient	12051	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 2.5 CM/<	Dermatology	1	0		
Outpatient	12052	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 2.6-5.0 CM	Dermatology	1	0		
Outpatient	12053	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 5.1-7.5 CM	Dermatology	1	0		
Outpatient	12054	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 7.6-12.5 CM	Dermatology	1	0		
Outpatient	12055	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 12.6-20.0CM	Dermatology	1	0		
Outpatient	12056	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 20.1-30.0CM	Dermatology	1	0		
Outpatient	12057	REPAIR INTERMEDIATE F/E/E/N/L&/MUC >30.0 CM	Dermatology	1	0		
Outpatient	13101	REPAIR COMPLEX TRUNK 2.6-7.5 CM	Surgery, Plastic	1	0		
Outpatient	13102	REPAIR COMPLEX TRUNK EACH ADDITIONAL 5 CM/<	Surgery, Plastic	1	0		
Outpatient	13132	REPAIR COMPLEX F/C/C/M/N/AX/G/H/F 2.6-7.5 CM	Dermatology	3	0		
Outpatient	13151	REPAIR COMPLEX EYELID/NOSE/EAR/LIP 1.1-2.5 CM	Dermatology	1	0		
Outpatient	13152	REPAIR COMPLEX EYELID/NOSE/EAR/LIP 2.6-7.5 CM	Dermatology	1	0		
Outpatient	13153	REPAIR COMPLX EYELID/NOSE/EAR/LIP EA ADDL 5 CM/<	Dermatology	1	0		
Outpatient	14040	SKIN TISSUE REARRANGEMENT	Otolaryngology	2	0		
Outpatient	14301	ADJNT TIS TRNSFR/REARGMT ANY AREA 30.1-60 SQ CM	Surgery	2	1	Medical Necessity	
Outpatient	14301	ADJNT TIS TRNSFR/REARGMT ANY AREA 30.1-60 SQ CM	Surgery, Plastic	2	0		
Outpatient	14302	ADJNT TIS TRNSFR/REARGMT DEFEC EA ADDL 30 SQCM/<	Surgery	1	1	Medical Necessity	
Inpatient	15002	PREP SITE TRUNK/ARM/LEG 1ST 100 SQ CM/1PCT	Surgery	1	1	Medical Necessity	
Inpatient	15002	PREP SITE TRUNK/ARM/LEG 1ST 100 SQ CM/1PCT	Surgery, Plastic	1	0		
Inpatient	15003	PREP SITE TRUNK/ARM/LEG ADDL 100 SQ CM/1PCT	Surgery	1	1	Medical Necessity	
Inpatient	15003	PREP SITE TRUNK/ARM/LEG ADDL 100 SQ CM/1PCT	Surgery, Plastic	1	0		
Outpatient	15576	FRMJ DIRECT/TUBED PEDICLE W/WOTR E/N/E/L/NTRORAL	Dermatology	1	0		
Outpatient	15630	DELAY FLAP/SCTJ FLAP EYELIDS NOSE EARS/LIPS	Dermatology	1	0		
Inpatient	15734	MUSC MYOCUTANEOUS/FASCIOCUTANEOUS FLAP TRUNK	Surgery	2	1	Medical Necessity	
Outpatient	15771	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs 50 cc or less injectate	Surgery, Plastic and Reconstructive	1	0		

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		Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; each additional 50 cc injectate, or part thereof (List separately in addition to code for procedure)		1	0		
Outpatient	15772	IMPLNT BIO IMPLNT FOR SOFT TISSUE REINFORCEMENT	Surgery, Plastic and Reconstructive	1	1	Medical Necessity	
Outpatient	15777	IMPLNT BIO IMPLNT FOR SOFT TISSUE REINFORCEMENT	Surgery, Plastic and Reconstructive	3	0		
Outpatient	15823	BLEPHAROPLASTY UPPER EYELID W/EXCESSIVE SKIN	Ophthalmology	7	0		
Outpatient	15830	EXCISION SKIN ABD INFRAUMBILICAL PANNICULECTOMY	Surgery, Plastic	0	2	Medical Necessity	1
Outpatient	15860	IV INJECTION TEST VASCULAR FLOW FLAP/GRAFT	Surgery, Plastic	1	0		
Outpatient	17311	MOHS MICROGRAPHIC H/N/H/F/G 1ST STAGE 5 BLOCKS	Dermatology	4	0		
Outpatient	17315	MOHS TRUNK/ARM/LEG EA ADDL BLOCK ANY STAGE	Dermatology	1	0		
Outpatient	19120	EXC CYST/ABERRANT BREAST TISSUE OPEN 1/> LESION	Surgery	3	0		
Outpatient	19316	MASTOPEXY	Surgery, Plastic	3	1	Medical Necessity	
Inpatient	19318	BREAST REDUCTION	Surgery, Plastic	11	7	Medical Necessity	
Inpatient	19328	RMVL INTACT BREAST IMPLANT	Surgery, Plastic and Reconstructive	1	0		
Outpatient	19340	INSJ BREAST IMPLT SM D MAST	Surgery, Plastic and Reconstructive	1	0		
Outpatient	19342	INSJ/RPLCMT BRST IMPLT SEP D	Surgery, Plastic and Reconstructive	1	0		
Outpatient	19350	NIPPLE/AREOLA RECONSTRUCTION	Surgery, Plastic and Reconstructive	5	0		
Outpatient	19357	TISS XPNDR PLMT BRST RCNSTJ	Surgery, Plastic and Reconstructive	4	0		
Inpatient	19364	BRST RCNSTJ FREE FLAP	Surgery, Plastic and Reconstructive	1	0		
Outpatient	19370	REVJ PERI-IMPLT CAPSULE BRST	Surgery, Plastic and Reconstructive	1	0		
Outpatient	19371	PERI-IMPLT CAPSLC BRST COMPL	Surgery, Plastic and Reconstructive	2	0		
Outpatient	19380	REVJ RECONSTRUCTED BREAST	Surgery, Plastic and Reconstructive	3	0		
Outpatient	20553	INJECTION SINGLE/MLT TRIGGER POINT 3/> MUSCLES	Obstetrics & Gynecology	1	0		
Outpatient	20680	REMOVAL IMPLANT DEEP	Sports Medicine	1	0		
Outpatient	20680	REMOVAL IMPLANT DEEP	Surgery, Orthopedic	3	0		
Inpatient	20930	ALLOGRAFT FOR SPINE SURGERY ONLY MORSELIZED	Surgery, Neurological	3	1	Medical Necessity	
Inpatient	20930	ALLOGRAFT FOR SPINE SURGERY ONLY MORSELIZED	Surgery, Orthopedic	3	6	Medical Necessity	
Inpatient	20931	ALLOGRAFT FOR SPINE SURGERY ONLY STRUCTURAL	Surgery, Neurological	1	0		
Inpatient	20931	ALLOGRAFT FOR SPINE SURGERY ONLY STRUCTURAL	Surgery, Orthopedic	2	2	Medical Necessity	
Inpatient	20936	AUTOGRAFT SPINE SURGERY LOCAL FROM SAME INCISION	Surgery, Neurological	1	0		
Inpatient	20936	AUTOGRAFT SPINE SURGERY LOCAL FROM SAME INCISION	Surgery, Orthopedic	1	2	Medical Necessity	
Inpatient	20938	AUTOGRAFT SPINE SURGERY BICORT/TRICORT SEP INC	Surgery, Orthopedic	1	0		
Outpatient	20939	BONE MARROW ASPIRATION BONE GRFG SPI SURG ONLY	Surgery, Neurological	0	1	Medical Necessity	
Outpatient	20985	CPTR-ASST SURGICAL NAVIGATION IMAGE-LESS	Surgery, Orthopedic	2	0		
Outpatient	21085	IMPRESSION & PREPARATION ORAL SURGICAL SPLINT	Surgery, Oral & Macillofacial	1	0		
Outpatient	21320	CLSD TX NSL FX W/MNPJ&STABLJ	Otolaryngology	1	0		

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Outpatient	21485	CLOSED TX TEMPOROMANDIBULAR DISLC COMP 1ST/SBSQ	Surgery, Oral & Macillofacial	1	0		
Outpatient	21552	EXC TUMOR SOFT TIS NECK/ANT THORAX SUBQ 3 CM/>	Surgery	3	0		
Inpatient	21743	REPAIR PECTUS EXCAVATM/CARINATM MINLY W/THRSC	Surgery, Thoracic	1	0		
Inpatient	22214	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM LMBR	Surgery, Neurological	1	0		
Inpatient	22214	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM LMBR	Surgery, Orthopedic	0	1	Medical Necessity	
Inpatient	22216	OSTEOT SPI PST/PSTLAT APPR 1 VRT SGM EA VRT SGM	Surgery, Orthopedic	0	1	Administrative	
Inpatient	22551	ARTHRD ANT INTERBODY DECOMPRESS CERVICAL BELW C2	Surgery, Neurological	1	1	Medical Necessity	
Inpatient	22551	ARTHRD ANT INTERBODY DECOMPRESS CERVICAL BELW C2	Surgery, Orthopedic	4	2	Medical Necessity	
Inpatient	22552	ARTHRD ANT INTERDY CERVCL BELW C2 EA ADDL NTRSPC	Surgery, Neurological	1	1	Medical Necessity	
Inpatient	22552	ARTHRD ANT INTERDY CERVCL BELW C2 EA ADDL NTRSPC	Surgery, Orthopedic	4	2	Medical Necessity	
Outpatient	22558	ARTHRODESIS ANTERIOR INTERBODY LUMBAR	Surgery, Orthopedic	2	3	Medical Necessity	
Outpatient	22585	ARTHRODESIS ANTERIOR INTERBODY EA ADDL NTRSPC	Surgery, Orthopedic	0	1	Medical Necessity	
Inpatient	22600	ARTHRD PST TQ 1NTRSPC CRV	Surgery, Orthopedic	1	0		
Inpatient	22612	ARTHRD PST TQ 1NTRSPC LUMBAR	Surgery, Orthopedic	1	3	Medical Necessity	
Inpatient	22614	ARTHRD PST TQ 1NTRSPC EA ADD	Surgery, Orthopedic	1	2	Medical Necessity	
Inpatient	22633	ARTHRD CMBN 1NTRSPC LUMBAR	Surgery, Neurological	2	0		
Inpatient	22633	ARTHRD CMBN 1NTRSPC LUMBAR	Surgery, Orthopedic	0	2	Medical Necessity	
Inpatient	22634	ARTHRD CMBN 1NTRSPC EA ADDL	Surgery, Orthopedic	0	1	Administrative	
Inpatient	22840	POSTERIOR NON-SEGMENTAL INSTRUMENTATION	Surgery, Neurological	2	0		
Inpatient	22840	POSTERIOR NON-SEGMENTAL INSTRUMENTATION	Surgery, Orthopedic	1	4	Medical Necessity	
Inpatient	22842	POSTERIOR SEGMENTAL INSTRUMENTATION 3-6 VRT SEG	Surgery, Orthopedic	0	1	Medical Necessity	
Inpatient	22843	POSTERIOR SEGMENTAL INSTRUMENTATION 7-12 VRT SEG	Surgery, Orthopedic	1	0		
Inpatient	22844	POSTERIOR SEGMENTAL INSTRUMENTATION 13/> VRT SE	Surgery, Orthopedic	0	1	Administrative	
Inpatient	22845	ANTERIOR INSTRUMENTATION 2-3 VERTEBRAL SEGMENTS	Surgery, Neurological	1	1	Medical Necessity	
Inpatient	22845	ANTERIOR INSTRUMENTATION 2-3 VERTEBRAL SEGMENTS	Surgery, Orthopedic	3	5	Medical Necessity	
Inpatient	22848	PELVIC FIXATION OTHER THAN SACRUM	Surgery, Orthopedic	0	1	Administrative	
Inpatient	22853	INSJ BIOMCHN DEV INTERVERTEBRAL DSC SPC W/ARTHRD	Surgery, Neurological	2	1	Medical Necessity	
Inpatient	22853	INSJ BIOMCHN DEV INTERVERTEBRAL DSC SPC W/ARTHRD	Surgery, Orthopedic	3	9	Medical Necessity	
Outpatient	22854	INSJ BIOMCHN DEV VRT CORPECTOMY DEFECT W/ARTHRD	Surgery, Orthopedic	0	1	Medical Necessity	
Inpatient	22856	TOT DISC ARTHRP ART DISC ANT APPRO 1 NTRSPC CRV	Surgery, Orthopedic	3	1	Medical Necessity	
Inpatient	22857	TOT DISC ARTHRP 1NTRSPC LMBR	Surgery, Neurological	1	0		
Inpatient	22899	UNLISTED PROCEDURE SPINE	Surgery, Neurological	0	1	Administrative	
Inpatient	22900	EXC TUMOR SOFT TISSUE ABDL WALL SUBFASCIAL <5CM	Surgery, Oncology	1	0		
Outpatient	23420	RECONSTRUCTION ROTATOR CUFF AVULSION CHRONIC	Surgery, Orthopedic	1	0		
Outpatient	23430	TENODESIS LONG TENDON BICEPS	Sports Medicine	1	0		

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Inpatient	23472	ARTHROPLASTY GLENOHUMERAL JOINT TOTAL SHOULDER	Surgery, Orthopedic	9	5	Medical Necessity	1
Outpatient	23473	REVIS SHOULDER ARTHRPLSTY HUMERAL/GLENOID COMPNT	Surgery, Orthopedic	1	0		
Outpatient	23474	REVIS SHOULDER ARTHRPLSTY HUMERAL&GLENOID COMPNT	Surgery, Orthopedic	1	0		
Outpatient	24342	RINSJ RPTD BICEPS/TRICEPS TDN DSTL W/WO TDN GRF	Surgery, Orthopedic	3	0		
Outpatient	25609	OPTX DSTL RADL I-ARTIC FX/EPIPHYSL SEP 3 FRAG	Surgery, Orthopedic	1	0		
Outpatient	26055	TENDON SHEATH INCISION	Surgery, Hand/Orthopedic	2	0		
Outpatient	26055	TENDON SHEATH INCISION	Surgery, Plastic	2	0		
Outpatient	26160	REMOVE TENDON SHEATH LESION	Surgery, Hand/Orthopedic	1	0		
Outpatient	26160	REMOVE TENDON SHEATH LESION	Surgery, Plastic	1	0		
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	ambulatory surgery center	17	5	Medical Necessity	
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	anesthesiology	17	1	Medical Necessity	
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	diagnostic radiology	2	0		
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	family practice	2	0		
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	general surgery	1	1	Medical Necessity	
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	hospital	6	2	Medical Necessity	
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	Hospital	0	1	Medical Necessity	
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	multiple specialty site	1	0		
Outpatient	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	specialty hospitals	3	2	Medical Necessity	
Inpatient	27130	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	General Practice	1	0		
Inpatient	27130	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	Pediatric Orthopedic	1	0		
Inpatient	27130	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	Sports Medicine	2	3	Medical Necessity	
Inpatient	27130	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	Surgery	1	0		
Inpatient	27130	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	Surgery, Orthopedic	16	2	Medical Necessity	

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Inpatient	27147	OSTEOTOMY ILIAC ACETABULAR/INNOMINATE HIP RDCTJ	Surgery, Orthopedic	1	0		
Outpatient	27415	OSTEOCHONDRAL ALLOGRAFT KNEE OPEN	Surgery, Orthopedic	0	1	Medical Necessity	
Outpatient	27446	ARTHRP KNEE CONDYLE&PLATEAU MEDIAL/LAT CMPRT	Surgery, Orthopedic	1	3	Medical Necessity	
Inpatient	27447	ARTHRP KNE CONDYLE&PLATU MEDIAL&LAT COMPARTMENTS	Surgery, Orthopedic	27	13	Medical Necessity	1
Outpatient	27487	REVJ TOT KNEE ARTHRP FEM&ENTIRE TIBIAL COMPONE	Surgery, Orthopedic	0	1	Medical Necessity	
Outpatient	27570	MANIPULATION KNEE JOINT UNDER GENERAL ANESTHESIA	Surgery, Orthopedic	2	0		
Outpatient	27638	EXC/CURETTAGE CYST/TUMOR TIBIA/FIBULA W/ALGRAFT	Podiatrist	1	0		
Outpatient	27641	PARTIAL EXCISION BONE FIBULA	Podiatrist	1	0		
Outpatient	27650	REPAIR PRIMARY OPEN/PRQ RUPTURED ACHILLES TENDON	Surgery, Orthopedic	2	0		
Outpatient	27698	REPAIR SECONDARY DISRUPTED LIGAMENT ANKLE COLTRL	Podiatrist	1	0		
Outpatient	29848	NDSC WRST SURG W/RLS TRANSVRS CARPL LIGM	Surgery, Hand/Orthopedic	2	1	Administrative	
Outpatient	29863	ARTHROSCOPY HIP SURGICAL W/SYNOVECTOMY	Surgery, Orthopedic	0	1	Medical Necessity	
Outpatient	29914	ARTHROSCOPY HIP W/FEMOROPLASTY	Surgery, Orthopedic	6	4	Medical Necessity	
Outpatient	29915	ARTHROSCOPY HIP W/ACETABULOPLASTY	Surgery, Orthopedic	0	1	Medical Necessity	
Outpatient	29916	ARTHROSCOPY HIP W/LABRAL REPAIR	Surgery, Orthopedic	7	4	Medical Necessity	
Outpatient	29999	UNLISTED PROCEDURE ARTHROSCOPY	Surgery, Orthopedic	0	1	Medical Necessity	
Outpatient	30140	SUBMUCOUS RESCJ INFERIOR TURBINATE PRTL/COMPL	Otolaryngology	7	1	Medical Necessity	
Outpatient	30465	REPAIR NASAL VESTIBULAR STENOSIS	Otolaryngology	1	0		
Outpatient	30520	SEPTOPLASTY/SUBMUCOUS RESECEJ W/WO CARTILAGE GRF	Otolaryngology	10	1	Medical Necessity	
Outpatient	30802	ABL TJ SOF TISS INF TURBS UNI/BI SUPFC INTRAMURAL	Otolaryngology	1	0		
Outpatient	31231	NASAL ENDOSCOPY DIAGNOSTIC UNI/BI SPX	Otolaryngology	1	0		
Outpatient	31237	NASAL/SINUS NDSC SURG W/BX POLYPECT/DBRDMT SPX	Otolaryngology	1	0		
Outpatient	31240	NASAL/SINUS NDSC SURG W/CONCHA BULLOSA RESECTION	Otolaryngology	2	0		
Outpatient	31254	NASAL/SINUS ENDOSCOPY W/ETHMOIDECTOMY PARTIAL	Otolaryngology	4	2	Medical Necessity	
Outpatient	31255	NASAL/SINUS ENDOSCOPY W/ETHMOIDECTOMY TOTAL	Otolaryngology	1	0		
Outpatient	31256	NASAL/SINUS ENDOSCOPY W/MAXILLARY ANTROSTOMY	Otolaryngology	3	0		
Outpatient	31257	NASAL/SINUS NDSC TOTAL WITH SPHENOIDOTOMY	Otolaryngology	1	0		
Outpatient	31259	NASAL/SINUS NDSC TOT W/SPHENDT W/SPHEN TISS RMVL	Otolaryngology	1	1	Medical Necessity	
Outpatient	31267	NSL/SINUS NDSC MAX ANTROST W/RMVL TISS MAX SINUS	Otolaryngology	6	2	Medical Necessity	
Outpatient	31276	NASAL/SINUS NDSC W/FRONTAL SINUS EXPLORATION	Otolaryngology	4	2	Medical Necessity	
Outpatient	31287	NASAL/SINUS ENDOSCOPY W/SPHENOIDECTOMY	Otolaryngology	1	0		
Outpatient	31288	NSL/SINUS NDSC SPHENDT RMVL TISS SPHENOID SINUS	Otolaryngology	1	0		
Outpatient	31295	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation) maxillary sinus ostium, transnasal or via canine fossa	Otolaryngology	3	0		
Outpatient	31296	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation) frontal sinus ostium	Otolaryngology	2	0		

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Outpatient	31297	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation) sphenoid sinus ostium	Otolaryngology	1	0		
Outpatient	31298	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation) frontal and sphenoid sinus ostia	Otolaryngology	3	0		
Outpatient	31526	LARYNGOSCOPY W/WO TRACHEOSCOPY W/MICRO/TELESCOPE	General Practice	1	0		
Outpatient	31622	BRNCHSC INCL FLUOR GID DX W/CELL WASHG SPX	General Practice	1	0		
Inpatient	32480	RMVL LUNG OTHER THAN PNEUMONECTOMY 1 LOBE LOBECT	Surgery, Thoracic Cardiovascular	1	0		
Inpatient	32666	THORACOSCOPY W/THERA WEDGE RESEXN INITIAL UNILAT	Surgery, Thoracic Cardiovascular	1	0		
Outpatient	32854	LUNG TRANSPLANT 2 W/CARDIOPULMONARY BYPASS	Critical Care Medicine	1	0		
Outpatient	32854	LUNG TRANSPLANT 2 W/CARDIOPULMONARY BYPASS	Surgery, Thoracic	2	0		
Inpatient	33120	EXC INTRACARDIAC TUMOR RESCJ CARDIOPULMONARY BYP	Surgery, Thoracic	1	0		
Outpatient	33208	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular	specialty hospitals	1	0		
Outpatient	33228	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; dual lead system	specialty hospitals	1	0		
Outpatient	33249	Insertion or replacement of permanent pacing cardioverter-defibrillator system with transvenous lead(s)single or dual chamber	hospital	1	0		
Outpatient	33249	Insertion or replacement of permanent pacing cardioverter-defibrillator system with transvenous lead(s)single or dual chamber	specialty hospitals	1	0		
Inpatient	33340	PERQ CLSR TCAT L ATR APNDGE W/ENDOCARDIAL IMPLNT	Cardiology	1	0		
Inpatient	33864	ASCENDING AORTA GRF VALVE SPARE ROOT REMODEL	Surgery, Thoracic	1	0		
Inpatient	34718	Endovascular repair of iliac artery, not associated with placement of an aorto-iliac artery endograft at the same session, by deployment of an iliac branched endograft, including pre-procedure sizing	Surgery, Thoracic Cardiovascular	1	0		
Inpatient	35301	TEAEC W/PATCH GRF CAROTID VERTB SUBCLAV NECK INC	Surgery	2	0		
Inpatient	35565	BYPASS W/VEIN ILIOFEMORAL	Surgery	1	0		
Inpatient	35656	BYP OTH/THN VEIN FEMORAL-POPLITEAL	Surgery, Thoracic Cardiovascular	3	0		
Outpatient	36465	NJX NONCMPND SCLEROSANT SINGLE INCMPTNT VEIN	Cardiovascular Disease	4	0		
Outpatient	36465	NJX NONCMPND SCLEROSANT SINGLE INCMPTNT VEIN	Internal Medicine	1	0		
Outpatient	36465	NJX NONCMPND SCLEROSANT SINGLE INCMPTNT VEIN	Surgery, Thoracic	1	0		
Outpatient	36466	NJX NONCMPND SCLEROSANT MULTIPLE INCMPTNT VEINS	Internal Medicine	1	0		
Outpatient	36466	NJX NONCMPND SCLEROSANT MULTIPLE INCMPTNT VEINS	Surgery	2	0		
Outpatient	36471	NJX SCLEROSING SOLUTION MULTIPLE VEINS SAME LEG	Family Practice	2	0		
Outpatient	36471	NJX SCLEROSING SOLUTION MULTIPLE VEINS SAME LEG	Internal Medicine	2	0		
Outpatient	36471	NJX SCLEROSING SOLUTION MULTIPLE VEINS SAME LEG	Surgery	2	0		

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Outpatient	36471	NJX SCLEROSING SOLUTION MULTIPLE VEINS SAME LEG	Surgery, General Vascular	2	0		
Outpatient	36471	NJX SCLEROSING SOLUTION MULTIPLE VEINS SAME LEG	Surgery, Thoracic	1	0		
Outpatient	36471	NJX SCLEROSING SOLUTION MULTIPLE VEINS SAME LEG	Vascular & Interventional Radiology	1	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Cardiovascular Disease	4	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Family Practice	2	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Internal Medicine	2	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Obstetrics & Gynecology	1	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Physician Assistant	2	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Radiology, Diagnostic	1	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Surgery	9	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Surgery, General Vascular	3	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Surgery, Thoracic	1	0		
Outpatient	36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	Vascular & Interventional Radiology	1	0		
Outpatient	36476	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 2ND+ VEINS	Surgery, General Vascular	2	0		
Outpatient	36476	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 2ND+ VEINS	Surgery, Thoracic	1	0		
Outpatient	36476	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 2ND+ VEINS	Vascular & Interventional Radiology	1	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Internal Medicine	1	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Physician Assistant	2	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Radiology, Diagnostic	1	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Surgery	2	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Surgery, General Vascular	2	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Surgery, Thoracic	2	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Surgery, Thoracic Cardiovascular	1	0		
Outpatient	36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	Vascular & Interventional Radiology	2	0		
Outpatient	36479	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 2ND+ VEINS	Surgery	1	0		
Outpatient	37765	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	Internal Medicine	1	0		
Outpatient	37765	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	Obstetrics & Gynecology	1	0		
Outpatient	37765	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	Physician Assistant	2	0		
Outpatient	37765	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	Surgery	1	0		
Outpatient	37765	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	Surgery, General Vascular	2	0		
Outpatient	37765	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	Surgery, Thoracic	1	0		
Outpatient	37766	STAB PHLEBT VARICOSE VEINS 1 XTR > 20 INCS	Physician Assistant	1	0		
Outpatient	37766	STAB PHLEBT VARICOSE VEINS 1 XTR > 20 INCS	Surgery	1	0		
Inpatient	38100	SPLENECTOMY TOTAL SEPARATE PROCEDURE	Surgery	1	0		
Inpatient	39220	RESECTION MEDIASTINAL TUMOR	Surgery	1	0		

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Outpatient	40819	EXC FRENUM LABIAL/BUCCAL	General Practice - Dental	1	1	Administrative	
Outpatient	41115	EXCIISION LINGUAL FRENUM FRENECTOMY	General Practice - Dental	1	1	Administrative	
Outpatient	42145	PALATOPHARYNGOPLASTY	Otolaryngology	0	1	Medical Necessity	
Outpatient	42820	TONSILLECTOMY & ADENOIDECTOMY <AGE 12	General Practice	1	0		
Outpatient	42820	TONSILLECTOMY & ADENOIDECTOMY <AGE 12	Otolaryngology	2	0		
Outpatient	42821	TONSILLECTOMY & ADENOIDECTOMY AGE 12/>	Otolaryngology	1	0		
Outpatient	42826	TONSILLECTOMY ONE-HALF AGE 12/>	Otolaryngology	3	1	Medical Necessity	
Outpatient	42830	ADENOIDECTOMY PRIMARY <AGE 12	Otolaryngology	3	0		
Outpatient	42831	ADENOIDECTOMY PRIMARY AGE 12/>	Otolaryngology	1	0		
Outpatient	42950	PHARYNGOPLASTY PLSTC/RCNSTV OPRATION PHARYNX	Otolaryngology	0	1	Medical Necessity	
Outpatient	42975	DISE EVAL SLP DO BRTH FLX DX	General Practice	1	0		
Outpatient	43235	UPPER GI NDSC DX W/WO COLLECTION SPECIMEN	Family Practice	1	0		
Outpatient	43235	UPPER GI NDSC DX W/WO COLLECTION SPECIMEN	Gastroenterology	38	1	Medical Necessity	
Outpatient	43235	UPPER GI NDSC DX W/WO COLLECTION SPECIMEN	Internal Medicine	4	0		
Outpatient	43235	UPPER GI NDSC DX W/WO COLLECTION SPECIMEN	Surgery	6	0		
Outpatient	43237	UPR GI NDSC & US NDSC EXAM LMTD ESOPHAGUS	Gastroenterology	1	0		
Outpatient	43238	UPR GI NDSC TNDSC US FINE NDL ASPIR/BX ESOPH	Gastroenterology	1	0		
Inpatient	43239	UPPER NDSC BIOPSY SINGLE/MULTIPLE	family Practice	4	0		
Inpatient	43239	UPPER NDSC BIOPSY SINGLE/MULTIPLE	Gastroenterology	40	0		
Inpatient	43239	UPPER NDSC BIOPSY SINGLE/MULTIPLE	Internal Medicine	5	0		
Inpatient	43239	UPPER NDSC BIOPSY SINGLE/MULTIPLE	Pediatric Gastroenterology	12	0		
Inpatient	43239	UPPER NDSC BIOPSY SINGLE/MULTIPLE	Surgery	7	0		
Outpatient	43241	UPR GI NDSC TNDSC INTRALUMINAL TUBE/CATH PLMT	Gastroenterology	1	0		
Outpatient	43248	UPR GI NDSC INSJ GUIDE WIRE DILAT ESOPHAGUS	Gastroenterology	6	0		
Outpatient	43248	UPR GI NDSC INSJ GUIDE WIRE DILAT ESOPHAGUS	Internal Medicine	3	0		
Outpatient	43248	UPR GI NDSC INSJ GUIDE WIRE DILAT ESOPHAGUS	Surgery	1	0		
Inpatient	43249	UPR GI NDSC BALLOON DILAT ESOPH <30 MM DIAM	Family Practice	2	0		
Inpatient	43249	UPR GI NDSC BALLOON DILAT ESOPH <30 MM DIAM	Gastroenterology	8	0		
Inpatient	43249	UPR GI NDSC BALLOON DILAT ESOPH <30 MM DIAM	Internal Medicine	3	0		
Inpatient	43249	UPR GI NDSC BALLOON DILAT ESOPH <30 MM DIAM	Pediatric Gastroenterology	1	0		
Inpatient	43249	UPR GI NDSC BALLOON DILAT ESOPH <30 MM DIAM	Surgery	2	0		
Outpatient	43251	UPR GI NDSC RMVL TUM POLYP/OTH LES SNARE TQ	Gastroenterology	2	0		
Outpatient	43251	UPR GI NDSC RMVL TUM POLYP/OTH LES SNARE TQ	Internal Medicine	4	0		
Outpatient	43259	UPPER GI NDSC W/NDSC ULTRASOUND EXAM	Gastroenterology	4	0		
Outpatient	43259	UPPER GI NDSC W/NDSC ULTRASOUND EXAM	Internal Medicine	3	0		



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Outpatient	43260	ERCP DX W/WO COLLJ SPEC BRUSHING/WASHING SPX	Internal Medicine	1	0		
Outpatient	43264	ERCP W/RMVCALCULI BILIARY&/PANCREATIC DUCTS	Internal Medicine	1	0		
Outpatient	43274	ERCP STENT PLACEMENT BILIARY/PANCREATIC DUCT	Internal Medicine	1	0		
Outpatient	43275	ERCP REMOVE FOREIGN BODY/STENT BILIARY/PANC DUCT	Internal Medicine	1	0		
Outpatient	45378	COLONOSCOPY FLX DX W/WO COLLJ SPECIMENS	Family Practice	11	0		
Outpatient	45378	COLONOSCOPY FLX DX W/WO COLLJ SPECIMENS	Gastroenterology	80	0		
Outpatient	45378	COLONOSCOPY FLX DX W/WO COLLJ SPECIMENS	Internal Medicine	6	0		
Outpatient	45378	COLONOSCOPY FLX DX W/WO COLLJ SPECIMENS	Surgery	5	0		
Outpatient	45378	COLONOSCOPY FLX DX W/WO COLLJ SPECIMENS	Surgery, Colon & Rectal	3	0		
Outpatient	45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	Family Practice	3	0		
Outpatient	45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	Gastroenterology	29	1	Administrative	
Outpatient	45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	Internal Medicine	3	0		
Outpatient	45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	Pediatric Gastroenterology	2	0		
Outpatient	45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	Surgery	5	0		
Outpatient	45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	Surgery, Colon & Rectal	1	0		
Outpatient	45384	COLSC FLX PROX SPLENIC FLXR RMVL LES CAUT	Family Practice	1	0		
Outpatient	45384	COLSC FLX PROX SPLENIC FLXR RMVL LES CAUT	Gastroenterology	7	0		
Outpatient	45384	COLSC FLX PROX SPLENIC FLXR RMVL LES CAUT	Internal Medicine	3	0		
Outpatient	45384	COLSC FLX PROX SPLENIC FLXR RMVL LES CAUT	Surgery	2	0		
Outpatient	45384	COLSC FLX PROX SPLENIC FLXR RMVL LES CAUT	Surgery, Colon & Rectal	1	0		
Outpatient	45385	COLSC FLX PROX SPLENIC FLXR RMVL LES SNARE TQ	family Practice	3	0		
Outpatient	45385	COLSC FLX PROX SPLENIC FLXR RMVL LES SNARE TQ	Gastroenterology	20	0		
Outpatient	45385	COLSC FLX PROX SPLENIC FLXR RMVL LES SNARE TQ	Internal Medicine	3	0		
Outpatient	45385	COLSC FLX PROX SPLENIC FLXR RMVL LES SNARE TQ	Surgery	2	0		
Outpatient	45385	COLSC FLX PROX SPLENIC FLXR RMVL LES SNARE TQ	Surgery, Colon & Rectal	1	0		
Outpatient	45386	COLSC FLX PROX SPLENIC FLXR DILAT BALO 1/> STRI	Gastroenterology	1	0		
Outpatient	45390	COLONOSCOPY FLX W/ENDOSCOPIC MUCOSAL RESECTION	Gastroenterology	3	0		
Outpatient	45390	COLONOSCOPY FLX W/ENDOSCOPIC MUCOSAL RESECTION	Internal Medicine	1	0		
Outpatient	45990	ANRCT XM SURG REQ ANES GENERAL SPI/EDRL DX	Surgery	1	0		
Outpatient	46255	HEMORRHOIDECTOMY NTRNL & XTRNL 1 COLUMN/GROUP	Surgery	6	0		
Outpatient	46257	HEMORRHOID NTRNL & XTRNL 1 COLUMN W/FISSURECTO	Surgery	1	0		
Outpatient	46258	HRHC 1 COL/GRP W/FSTULECTMY INCL FSSRECTOMY	Surgery	1	0		
Outpatient	46260	HEMORRHOIDECTOMY INT & XTRNL 2/> COLUMN/GRO	Surgery	5	0		
Outpatient	46270	SURG TX ANAL FISTULA SUBQ	Surgery	1	0		
Inpatient	46922	DSTRJ LESION ANUS SIMPLE SURG EXCISION	Surgery	1	1	Medical Necessity	

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		Hemorrhoidectomy, internal, by ligation other than rubber band; 2					
Outpatient	46946	or more hemorrhoid columns/groups, without imaging guidance	Surgery	0	0		
Outpatient	47135	LVR ALTRNSPLJ ORTHOTOPIC PRTL/WHL DON ANY AGE	Gastroenterology	0	0		
Outpatient	47562	LAPAROSCOPY SURG CHOLECYSTECTOMY	Surgery	10	1	Medical Necessity	
Outpatient	47562	LAPAROSCOPY SURG CHOLECYSTECTOMY	Surgery, Colon & Rectal	1	0		
Outpatient	47562	LAPAROSCOPY SURG CHOLECYSTECTOMY	Surgery, General Vascular	0	1	Medical Necessity	
Outpatient	47563	LAPS SURG CHOLECYSTECTOMY W/CHOLANGIOGRAPHY	Surgery	8	1	Medical Necessity	
Outpatient	47563	LAPS SURG CHOLECYSTECTOMY W/CHOLANGIOGRAPHY	Surgery, Colon & Rectal	1	0		
Inpatient	47610	CHOLECYSTECTOMY W/EXPLORATION COMMON DUCT	Surgery	1	0		
Outpatient	49320	LAPS ABD PRM&OMENTUM DX W/WO SPEC BR/WA SPX	Endocrinology, Reproductive	1	0		
Outpatient	49320	LAPS ABD PRM&OMENTUM DX W/WO SPEC BR/WA SPX	Obstetrics & Gynecology	6	0		
Outpatient	49320	LAPS ABD PRM&OMENTUM DX W/WO SPEC BR/WA SPX	Surgery, Oncology	1	0		
Outpatient	49505	RPR 1ST INGUN HRNA AGE 5 YRS/> REDUCIBLE	Surgery	1	0		
Inpatient	49540	REPAIR LUMBAR HERNIA	Surgery	1	0		
Outpatient	49591	RPR AA HRN 1ST < 3 CM RDC	Surgery	9	0		
Outpatient	49592	RPR AA HRN 1ST < 3 NCR/STRN	Surgery	3	0		
Outpatient	49593	RPR AA HRN 1ST 3-10 RDC	Surgery	6	1	Medical Necessity	
Outpatient	49594	RPR AA HRN 1ST 3-10 NCR/STRN	Surgery	3	0		
Outpatient	49595	RPR AA HRN 1ST > 10 RDC	Surgery	1	0		
Outpatient	49596	RPR AA HRN 1ST > 10 NCR/STRN	Surgery	1	0		
Inpatient	49614	RPR AA HRN RCR < 3 NCR/STRN	Surgery	1	0		
Inpatient	49616	RPR AA HRN RCR 3-10 NCR/STRN	Surgery	1	0		
Outpatient	49621	RPR PARASTOMAL HERNIA RDC	Surgery	1	0		
Outpatient	49650	LAPAROSCOPY SURG RPR INITIAL INGUINAL HERNIA	Surgery	9	0		
Outpatient	49651	LAPS SURG RPR RECURRENT INGUINAL HERNIA	Surgery	1	0		
Outpatient	50360	RENAL ALTRNSPLJ IMPLTJ GRF W/O RCP NEPHRECTOMY	General Practice	1	0		
Outpatient	50360	RENAL ALTRNSPLJ IMPLTJ GRF W/O RCP NEPHRECTOMY	Nephrology	1	0		
Outpatient	50360	RENAL ALTRNSPLJ IMPLTJ GRF W/O RCP NEPHRECTOMY	Transplant Hepatology	1	0		
Inpatient	50543	LAPAROSCOPY SURG PARTIAL NEPHRECTOMY	Urology	1	0		
Inpatient	50545	LAPAROSCOPY RADICAL NEPHRECTOMY	Urology	1	0		
Outpatient	50590	LITHOTRIPSY XTRCORP SHOCK WAVE	Urology	4	1	Medical Necessity	
Inpatient	51565	CSTC PRTL W/RIMPLTJ URTR IN BLDR URTRONEOCSTOST	Urology	1	0		
Outpatient	52000	CYSTOURETHROSCOPY	Obstetrics & Gynecology	12	1	Medical Necessity	
Outpatient	52000	CYSTOURETHROSCOPY	Urology	2	0		
Outpatient	52005	CYSTO BLADDER W/URETERAL CATHETERIZATION	Urology	2	0		
Outpatient	52224	CYSTO W/REMOVAL OF LESIONS SMALL	Urology	1	0		

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Outpatient	52234	CYSTO W/REMOVAL OF TUMORS SMALL	Urology	1	0		
Outpatient	52240	CYSTOURETHROSCOPY W/DEST &/RMVL TUMOR LARGE	Urology	1	0		
Outpatient	52281	CYSTO CALIBRATION DILAT URTL STRIX/STENOSIS	Urology	2	0		
Outpatient	52310	CYSTO W/SIMPLE REMOVAL STONE & STENT	Urology	2	0		
Outpatient	52332	CYSTO W/INSERT URETERAL STENT	Urology	5	1	Medical Necessity	
Outpatient	52351	CYSTO W/URTROSCOPY&/PYELOSOCOPY DX	Urology	2	1	Medical Necessity	
Outpatient	52352	CYSTO W/URETEROSCOPY W/RMVL/MANJ STONES	Urology	2	0		
Outpatient	52353	CYSTO W/URETEROSCOPY W/LITHOTRIPSY	Urology	3	0		
Outpatient	52356	CYSTO/URETERO W/LITHOTRIPSY &INDWELL STENT INSRT	Urology	6	2	Medical Necessity	
Outpatient	52601	TRURL ELECTROSURG RESCJ PROSTATE BLEED COMPLETE	Urology	1	0		
Outpatient	54161	CIRCUMCISION AGE >28 DAYS	Urology	1	0		
Outpatient	54640	Orchiopexy, inguinal or scrotal approach	Pediatrics	1	0		
Outpatient	55040	EXCISION HYDROCELE UNILATERAL	Pediatric Urology	1	0		
Outpatient	55040	EXCISION HYDROCELE UNILATERAL	Urology	1	0		
Outpatient	55700	PROSTATE NEEDLE BIOPSY ANY APPROACH	Urology	5	0		
Outpatient	57135	EXCISION VAGINAL CYST/TUMOR	Obstetrics & Gynecology	1	0		
Outpatient	57240	ANT COLPORRHAPHY CYSTOCELE W/WO RPR URETHROCELE	Obstetrics & Gynecology	1	0		
Outpatient	57283	COLPOPEXY VAGINAL INTRAPERITONEAL APPROACH	Obstetrics & Gynecology	1	0		
Outpatient	57288	SLING OPERATION STRESS INCONTINENCE	Obstetrics & Gynecology	7	0		
Outpatient	57410	PELVIC EXAMINATION W/ANESTHESIA OTHER THAN LOCAL	Obstetrics & Gynecology	0	1	Administrative	
Outpatient	57425	LAPAROSCOPY COLPOPEXY SUSPENSION VAGINAL APEX	Obstetrics & Gynecology	2	0		
Outpatient	57454	COLPOSCOPY CERVIX BX CERVIX & ENDOCRV CURRETAGE	Obstetrics & Gynecology	1	0		
Outpatient	57522	CONIZATION CERVIX W/WO D&C RPR ELTRD EXC	Obstetrics & Gynecology	1	0		
Inpatient	58180	SUPRACERVICAL ABDL HYSTER W/WO RMVL TUBE OVARY	Obstetrics & Gynecology	1	0		
Inpatient	58240	PEL EXNTJ GYNECOLOGIC MAL	Obstetrics & Gynecology	1	0		
Outpatient	58300	INSERTION INTRAUTERINE DEVICE IUD	Obstetrics & Gynecology	1	0		
Outpatient	58301	REMOVAL INTRAUTERINE DEVICE IUD	Obstetrics & Gynecology	1	0		
Outpatient	58322	ARTIFICIAL INSEMINATION INTRA-UTERINE	Endocrinology, Reproductive	8	0		
Outpatient	58322	ARTIFICIAL INSEMINATION INTRA-UTERINE	Obstetrics & Gynecology	2	2	Medical Necessity	
Outpatient	58322	ARTIFICIAL INSEMINATION INTRA-UTERINE	Physician Assistant	1	0		
Outpatient	58558	HYSTEROSCOPY BX ENDOMETRIUM&/POLYPC W/WO D&C	Endocrinology, Reproductive	2	0		
Outpatient	58558	HYSTEROSCOPY BX ENDOMETRIUM&/POLYPC W/WO D&C	Obstetrics & Gynecology	26	2	Medical Necessity	1
Outpatient	58561	HYSTEROSCOPY REMOVAL LEIOMYOMATA	Obstetrics & Gynecology	6	0		
Outpatient	58563	HYSTEROSCOPY ENDOMETRIAL ABLATION	Obstetrics & Gynecology	2	1	Medical Necessity	1
Inpatient	58571	LAPS TOTAL HYSTERECT 250 GM/< W/RMVL TUBE/OVARY	Family Practice	1	0		

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Inpatient	58571	LAPS TOTAL HYSTERECT 250 GM/< W/RMVL TUBE/OVARY	Obstetrics & Gynecology	3	0		
Outpatient	58661	LAPAROSCOPY W/RMVL ADNEXAL STRUCTURES	Obstetrics & Gynecology	1	0		
Outpatient	58720	SALPINGO-OOPHORECTOMY COMPL/PRTL UNI/BI SPX	Oncology, Gynecologic	1	0		
Inpatient	58970	FOLLICLE PUNCTURE OOCYTE RETRIEVAL ANY METHOD	Endocrinology, Reproductive	5	2	Medical Necessity	
Inpatient	58970	FOLLICLE PUNCTURE OOCYTE RETRIEVAL ANY METHOD	Obstetrics & Gynecology	2	1	Administrative	
Outpatient	58974	EMBRYO TRANSFER INTRAUTERINE	Endocrinology, Reproductive	5	2	Medical Necessity	
Outpatient	58974	EMBRYO TRANSFER INTRAUTERINE	Nurse Practitioner	1	0		
Inpatient	59320	CERCLAGE CERVIX PREGNANCY VAGINAL	Maternal & Fetal Medicine	1	0		
Inpatient	60270	THYROIDECT W/SUBSTERNAL SPLIT/TRANSTHORACIC	Surgery, Thoracic	1	0		
Inpatient	61510	CRANIEC TREPHINE BONE FLP BRAIN TUMOR SUPRTENTOR	Surgery, Neurological	1	0		
Inpatient	61512	CRNEC TREPHINE BONE FLAP MENINGIOMA SUPRATENTOR	Surgery, Neurological	1	0		
Inpatient	61781	STRTCTC CPTR ASSTD PX CRANIAL INTRADURAL	Surgery, Neurological	1	0		
Outpatient	61782	STRTCTC CPTR ASSTD PX EXTRADURAL CRANIAL	Otolaryngology	7	1	Medical Necessity	
Inpatient	61783	STEREOTACTIC COMPUTER ASSISTED PX SPINAL	Surgery, Orthopedic	1	0		
Inpatient	62143	RPLCMT BONE FLAP/PROSTHETIC PLATE SKULL	Surgery, Neurological	1	0		
		Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)		28	1		
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	ambulatory surgery center			Medical Necessity	
		Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)		12	2		
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	anesthesiology			Medical Necessity	
		Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)		8	0		
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	diagnostic radiology				
		Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)		1	0		
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	general surgery				
		Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)		1	0		
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	Hospital				

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	hospital	4	0		
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	multiple specialty site	4	1	Medical Necessity	
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	neurosurgery	1	0		
Outpatient	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	specialty hospitals	2	1	Medical Necessity	
Outpatient	62322	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance	ambulatory surgery center	1	0		
Outpatient	62322	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance	anesthesiology	0	1	Medical Necessity	
Outpatient	62322	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance	hospital	1	0		
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	ambulatory surgery center	19	14	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturnd on Appeal
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	anesthesiology	15	3	Medical Necessity	
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	diagnostic radiology	7	2	Medical Necessity	
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	family practice	2	1	Medical Necessity	
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	general practice	1	0		
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	Hospital	3	0		
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	hospital	3	3	Medical Necessity	
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	internal medicine	1	0		
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	multiple specialty site	1	1	Medical Necessity	

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		Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)		0	1		
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	rehabilitation medicine			Medical Necessity	
Outpatient	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	specialty hospitals	5	2	Medical Necessity	
Outpatient	63005	LAMINECTOMY W/O FFD 1/2 VERT SEG LUMBAR	Surgery, Neurological	1	0		
Outpatient	63030	LAMNOTMY INCL W/DCMPRSN NRV ROOT 1 INTRSPC LUMBR	Surgery, Neurological	1	0		
Outpatient	63030	LAMNOTMY INCL W/DCMPRSN NRV ROOT 1 INTRSPC LUMBR	Surgery, Orthopedic	2	2	Administrative	
Outpatient	63035	LAMNOTMY W/DCMPRSN NRV EACH ADDL CRVCL/LMBR	Surgery, Orthopedic	1	0		
Outpatient	63042	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC LUMBAR	Surgery, Orthopedic	1	0		
Outpatient	63044	LAMOT W/PRTL FFD HRNA8 REEXPL 1 NTRSPC EA LMBR	Surgery, Orthopedic	1	0		
Inpatient	63045	LAM FACETECTOMY & FORAMOTOMY 1 SEGMENT CERVICAL	Surgery, Orthopedic	1	0		
Outpatient	63047	LAM FACETECTOMY & FORAMOTOMY 1 SEGMENT LUMBAR	Surgery, Neurological	2	1	Medical Necessity	
Outpatient	63047	LAM FACETECTOMY & FORAMOTOMY 1 SEGMENT LUMBAR	Surgery, Orthopedic	3	3	Medical Necessity	
		LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT(S), (EG, SPINAL OR LATERAL RECESS STENOSIS)), SINGLE VERTEBRAL SEGM		2	1		
Inpatient	63048	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT(S), (EG, SPINAL OR LATERAL RECESS STENOSIS)), SINGLE VERTEBRAL SEGM	Surgery, Neurological			Medical Necessity	
		LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT(S), (EG, SPINAL OR LATERAL RECESS STENOSIS)), SINGLE VERTEBRAL SEGM		2	3		
Inpatient	63048	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT(S), (EG, SPINAL OR LATERAL RECESS STENOSIS)), SINGLE VERTEBRAL SEGM	Surgery, Orthopedic			Medical Necessity	
Inpatient	63052	LAM FACETC/FRMT ARTHRD LUM 1	Surgery, Orthopedic	0	1	Administrative	
Inpatient	63053	LAM FACTC/FRMT ARTHRD LUM EA	Surgery, Orthopedic	0	1	Administrative	
Outpatient	63056	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG LUMBAR	Surgery, Neurological	1	0		
Outpatient	63685	INSJ/RPLCMT SPI NPGR DIR/INDUXIVE COUPLING	Anesthesiology	2	0		
Outpatient	63685	INSJ/RPLCMT SPI NPGR DIR/INDUXIVE COUPLING	Surgery, Neurological	1	0		
Outpatient	63688	REVJ/RMVL IMPLANTED SPINAL NEUROSTIM GENERATOR	Anesthesiology	2	0		
Inpatient	63709	RPR DURAL/CSF LEAK/PSEUDOMENINGOCELE W/LAM	Surgery, Neurological	1	0		
Outpatient	64479	Epidural steroid injection	ambulatory surgery center	27	6	Medical Necessity	
Outpatient	64479	Epidural steroid injection	anesthesiology	12	0		
Outpatient	64479	Epidural steroid injection	hospital	6	2	Medical Necessity	

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Outpatient	64479	Epidural steroid injection	Hospital	3	0		
Outpatient	64479	Epidural steroid injection	multiple specialty site	1	0		
Outpatient	64479	Epidural steroid injection	specialty hospitals	1	0		
Outpatient	64483	Epidural steroid injection	ambulatory surgery center	156	28	Medical Necessity	1
Outpatient	64483	Epidural steroid injection	anesthesiology	86	8	Medical Necessity	1
Outpatient	64483	Epidural steroid injection	diagnostic radiology	6	1	Medical Necessity	
Outpatient	64483	Epidural steroid injection	family practice	3	3	Medical Necessity	1
Outpatient	64483	Epidural steroid injection	general surgery	4	0		
Outpatient	64483	Epidural steroid injection	hematology oncology	1	0		
Outpatient	64483	Epidural steroid injection	Hospital	5	1	Medical Necessity	
Outpatient	64483	Epidural steroid injection	hospital	28	7	Medical Necessity	
Outpatient	64483	Epidural steroid injection	multiple specialty site	25	1	Medical Necessity	
Outpatient	64483	Epidural steroid injection	neurosurgery	0	2	Medical Necessity	
Outpatient	64483	Epidural steroid injection	orthopaedic surgery	2	0		
Outpatient	64483	Epidural steroid injection	specialty hospitals	8	0		
Outpatient	64490	Facet joint injection/medial branch block	ambulatory surgery center	66	4	Medical Necessity	
Outpatient	64490	Facet joint injection/medial branch block	anesthesiology	41	2	Medical Necessity	
Outpatient	64490	Facet joint injection/medial branch block	diagnostic radiology	1	6	Medical Necessity	
Outpatient	64490	Facet joint injection/medial branch block	family practice	6	0		
Outpatient	64490	Facet joint injection/medial branch block	hospital	27	5	Medical Necessity	
Outpatient	64490	Facet joint injection/medial branch block	multiple specialty site	2	0		
Outpatient	64490	Facet joint injection/medial branch block	neurology	3	0		
Outpatient	64490	Facet joint injection/medial branch block	neurosurgery	0	2	Medical Necessity	
Outpatient	64490	Facet joint injection/medial branch block	orthopaedic surgery	3	3	Medical Necessity	
Outpatient	64490	Facet joint injection/medial branch block	specialty hospitals	1	2	Medical Necessity	
Outpatient	64490	Facet joint injection/medial branch block	sports medicine	2	0		
Outpatient	64491	Facet joint injection/medial branch block	hospital	0	1	Medical Necessity	
Outpatient	64493	Facet joint injection/medial branch block	ambulatory surgery center	74	9	Medical Necessity	
Outpatient	64493	Facet joint injection/medial branch block	anesthesiology	49	6	Medical Necessity	
Outpatient	64493	Facet joint injection/medial branch block	diagnostic radiology	2	0		
Outpatient	64493	Facet joint injection/medial branch block	general surgery	4	0		
Outpatient	64493	Facet joint injection/medial branch block	hospital	20	9	Medical Necessity	
Outpatient	64493	Facet joint injection/medial branch block	Hospital	5	3	Medical Necessity	
Outpatient	64493	Facet joint injection/medial branch block	multiple specialty site	18	2	Medical Necessity	
Outpatient	64493	Facet joint injection/medial branch block	neurology	2	0		



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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	64493	Facet joint injection/medial branch block	orthopaedic surgery	2	0		
Outpatient	64493	Facet joint injection/medial branch block	specialty hospitals	3	2	Medical Necessity	
Outpatient	64494	Facet joint injection/medial branch block	hospital	2	0		
Outpatient	64510	Regional sympathetic block	ambulatory surgery center	1	1	Medical Necessity	
Outpatient	64510	Regional sympathetic block	anesthesiology	1	0		
Outpatient	64510	Regional sympathetic block	multiple specialty site	1	0		
Outpatient	64520	Regional sympathetic block	ambulatory surgery center	1	0		
Outpatient	64520	Regional sympathetic block	anesthesiology	2	0		
Outpatient	64633	Spinal denervation RFA	ambulatory surgery center	41	4	Medical Necessity	1
Outpatient	64633	Spinal denervation RFA	anesthesiology	21	0		
Outpatient	64633	Spinal denervation RFA	diagnostic radiology	4	0		
Outpatient	64633	Spinal denervation RFA	family practice	8	0		
Outpatient	64633	Spinal denervation RFA	hospital	7	1	Medical Necessity	
Outpatient	64635	Spinal denervation RFA	ambulatory surgery center	39	8	Medical Necessity	
Outpatient	64635	Spinal denervation RFA	anesthesiology	37	3	Medical Necessity	
Outpatient	64635	Spinal denervation RFA	diagnostic radiology	4	2	Medical Necessity	
Outpatient	64635	Spinal denervation RFA	family practice	2	0		
Outpatient	64635	Spinal denervation RFA	general surgery	4	0		
Outpatient	64635	Spinal denervation RFA	hospital	12	3	Medical Necessity	
Outpatient	64635	Spinal denervation RFA	Hospital	3	0		
Outpatient	64635	Spinal denervation RFA	multiple specialty site	7	0		
Outpatient	64635	Spinal denervation RFA	specialty hospitals	2	0		
Outpatient	64721	NEUROPLASTY &/TRANSPOS MEDIAN NRV CARPAL TUNNE	Sports Medicine	1	0		
Outpatient	64721	NEUROPLASTY &/TRANSPOS MEDIAN NRV CARPAL TUNNE	Surgery	2	0		
Outpatient	64721	NEUROPLASTY &/TRANSPOS MEDIAN NRV CARPAL TUNNE	Surgery, Hand/Orthopedic	2	1	Administrative	
Outpatient	64721	NEUROPLASTY &/TRANSPOS MEDIAN NRV CARPAL TUNNE	Surgery, Orthopedic	1	0		
Outpatient	64890	NERVE GRAFT 1 STRAND HAND/FOOT </4 CM	Surgery, Plastic	1	0		
Inpatient	64912	NERVE REPAIR W/NERVE ALLOGRAFT FIRST STRAND	Surgery, Plastic	1	0		
Inpatient	64912	NERVE REPAIR W/NERVE ALLOGRAFT FIRST STRAND	Surgery, Plastic and Reconstructive	1	0		
Outpatient	67028	INTRAVITREAL NJX PHARMACOLOGIC AGT SPX	Ophthalmology	1	0		
Outpatient	67028	INTRAVITREAL NJX PHARMACOLOGIC AGT SPX	Retinal Ophthalmology	1	0		
Outpatient	67900	REPAIR BROW PTOSIS	Ophthalmology	1	0		
Outpatient	67903	RPR BLEPHAROPTOSIS LEVATOR RESCJ/ADVMNT INTERNAL	Ophthalmology	1	0		
Outpatient	67904	RPR BLEPHAROPTOSIS LEVATOR RESCJ/ADVMNT XTRNL	Ophthalmology	3	0		
Outpatient	67908	RPR BLPOS CONJUNCTIVO-TARSO-MUSC-LEVATOR RESCJ	Ophthalmology	1	0		

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	69436	TYMPANOSTOMY GENERAL ANESTHESIA	General Practice	1	0		
Outpatient	69436	TYMPANOSTOMY GENERAL ANESTHESIA	Otolaryngology	14	0		
Outpatient	69436	TYMPANOSTOMY GENERAL ANESTHESIA	Otology	1	0		
Outpatient	69436	TYMPANOSTOMY GENERAL ANESTHESIA	Pediatric Otolaryngology	2	0		
Inpatient	69990	MICROSURG TQS REQ USE OPERATING MICROSCOPE	Surgery, Neurological	2	0		
Outpatient	70336	Magnetic resonance (eg, proton) imaging, temporomandibular	diagnostic radiology	0	1	Medical Necessity	
Outpatient	70336	Magnetic resonance (eg, proton) imaging, temporomandibular	hospital	1	1	Medical Necessity	
Outpatient	70336	Magnetic resonance (eg, proton) imaging, temporomandibular	multiple specialty site	0	1	Medical Necessity	
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	ambulatory surgery center	1	0		
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	cardiology	1	0		
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	critical care	1	0		
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	diagnostic radiology	51	11	Medical Necessity	
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	emergency medicine	1	0		
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	family practice	0	1	Medical Necessity	
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	general practice	1	0		
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	hospital	18	2	Medical Necessity	
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	Hospital	1	0		
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	internal medicine	1	0		
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	multiple specialty site	14	3	Medical Necessity	
Outpatient	70450	Computerized axial tomography, head or brain; without contrast	specialty hospitals	14	3	Medical Necessity	
Outpatient	70460	Computerized axial tomography, head or brain; with contrast	diagnostic radiology	0	3	Medical Necessity	
Outpatient	70460	Computerized axial tomography, head or brain; with contrast	hospital	4	1	Medical Necessity	
Outpatient	70460	Computerized axial tomography, head or brain; with contrast	medical oncology	6	0		
Outpatient	70460	Computerized axial tomography, head or brain; with contrast	multiple specialty site	0	1	Medical Necessity	
Outpatient	70460	Computerized axial tomography, head or brain; with contrast	otolaryngology	0	1	Medical Necessity	
Outpatient	70460	Computerized axial tomography, head or brain; with contrast	specialty hospitals	0	2	Medical Necessity	
Outpatient	70470	Computerized axial tomography, head or brain; without contrast material, followed by contrast material(s) and further sections	diagnostic radiology	0	4	Medical Necessity	
Outpatient	70470	Computerized axial tomography, head or brain; without contrast material, followed by contrast material(s) and further sections	multiple specialty site	1	2	Medical Necessity	
Outpatient	70470	Computerized axial tomography, head or brain; without contrast material, followed by contrast material(s) and further sections	specialty hospitals	1	0		
Outpatient	70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material	ambulatory surgery center	1	0		
Outpatient	70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material	critical care	1	0		
Outpatient	70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material	diagnostic radiology	29	1	Medical Necessity	

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Outpatient	70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material	Hospital	2	0		
Outpatient	70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material	hospital	5	1	Medical Necessity	
Outpatient	70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material	multiple specialty site	9	0		
Outpatient	70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material	specialty hospitals	5	0		
Outpatient	70481	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; with contrast material(s)	diagnostic radiology	1	0		
Outpatient	70482	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle or inner ear; without contrast material, followed by contrast material(s) and further sections	diagnostic radiology	2	0		
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	allergy immunology	2	0		
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	cardiology	2	0		
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	diagnostic radiology	153	14	Medical Necessity	1
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	family practice	1	0		
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	general practice	2	0		
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	general surgery	4	0		
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	hospital	25	5	Medical Necessity	
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	Hospital	20	0		1
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	multiple specialty site	32	3	Medical Necessity	
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	ophthalmology	1	0		
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	otolaryngology	42	1	Medical Necessity	
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	specialty hospitals	8	2	Medical Necessity	
Outpatient	70486	Computerized tomography, maxillofacial area; without contrast material	surgery, head and neck	5	0		
Outpatient	70487	Computerized tomography, maxillofacial area; with contrast material(s)	diagnostic radiology	6	1	Medical Necessity	
Outpatient	70487	Computerized tomography, maxillofacial area; with contrast material(s)	hospital	2	0		

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Outpatient	70487	Computerized tomography, maxillofacial area; with contrast material(s)	multiple specialty site	1	0		
Outpatient	70487	Computerized tomography, maxillofacial area; with contrast material(s)	specialty hospitals	1	0		
Outpatient	70488	Computed tomography, maxillofacial area; without contrast material, followed by contrast material(s) and further sections	Hospital	1	0		
Outpatient	70488	Computed tomography, maxillofacial area; without contrast material, followed by contrast material(s) and further sections	hospital	0	1	Medical Necessity	
Outpatient	70488	Computed tomography, maxillofacial area; without contrast material, followed by contrast material(s) and further sections	specialty hospitals	0	1	Medical Necessity	
Outpatient	70490	Computed tomography, soft tissue neck; without contrast material	diagnostic radiology	4	2	Medical Necessity	
Outpatient	70490	Computed tomography, soft tissue neck; without contrast material	hospital	1	0		
Outpatient	70490	Computed tomography, soft tissue neck; without contrast material	medical oncology	2	0		
Outpatient	70490	Computed tomography, soft tissue neck; without contrast material	multiple specialty site	1	0		
Outpatient	70490	Computed tomography, soft tissue neck; without contrast material	specialty hospitals	1	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	allergy immunology	1	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	critical care	1	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	diagnostic radiology	44	5	Medical Necessity	
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	general practice	4	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	hematology oncology	0	3	Medical Necessity	
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	hospital	14	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	Hospital	7	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	medical oncology	2	1	Medical Necessity	
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	multiple specialty site	7	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	pediatrics	1	0		
Outpatient	70491	Computed tomography, soft tissue neck; with contrast material(s)	specialty hospitals	5	0		
Outpatient	70492	Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	anesthesiology	1	0		
Outpatient	70492	Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	diagnostic radiology	3	4	Medical Necessity	
Outpatient	70492	Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	emergency medicine	0	1	Medical Necessity	
Outpatient	70492	Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	hospital	1	1	Medical Necessity	
Outpatient	70492	Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	Hospital	1	0		

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overtured on Appeal
Outpatient	70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	critical care	2	0		
Outpatient	70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	diagnostic radiology	38	0		
Outpatient	70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	hospital	13	5	Medical Necessity	
Outpatient	70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	internal medicine	2	0		
Outpatient	70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	multiple specialty site	6	0		
Outpatient	70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	specialty hospitals	11	1	Medical Necessity	
Outpatient	70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image post processing	diagnostic radiology	14	2	Medical Necessity	
Outpatient	70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image post processing	Hospital	1	2	Medical Necessity	
Outpatient	70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image post processing	hospital	2	3	Medical Necessity	
Outpatient	70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image post processing	multiple specialty site	5	1	Medical Necessity	
Outpatient	70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image post processing	specialty hospitals	3	1	Medical Necessity	
Outpatient	70540	Magnetic resonance imaging, orbit, face, and neck	hospital	1	1	Medical Necessity	
Outpatient	70540	Magnetic resonance imaging, orbit, face, and neck	multiple specialty site	1	0		
Outpatient	70542	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; with contrast material(s)	diagnostic radiology	0	1	Medical Necessity	
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	diagnostic radiology	20	4	Medical Necessity	
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	family practice	1	0		

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overtured on Appeal
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	general practice	1	0		
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	hematology oncology	1	0		
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	hospital	5	4	Medical Necessity	
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	multiple specialty site	14	1	Medical Necessity	
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	pediatrics	1	0		
Outpatient	70543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	specialty hospitals	6	1	Medical Necessity	
Outpatient	70544	MRA head; wo contrast material	ambulatory surgery center	2	0		
Outpatient	70544	MRA head; wo contrast material	diagnostic radiology	37	3	Medical Necessity	
Outpatient	70544	MRA head; wo contrast material	family practice	1	0		
Outpatient	70544	MRA head; wo contrast material	hospital	6	1	Medical Necessity	
Outpatient	70544	MRA head; wo contrast material	multiple specialty site	7	2	Medical Necessity	
Outpatient	70544	MRA head; wo contrast material	pediatrics	1	0		
Outpatient	70544	MRA head; wo contrast material	specialty hospitals	5	0		
Outpatient	70545	Magnetic resonance angiography, head; with contrast material(s)	diagnostic radiology	2	0		
Outpatient	70545	Magnetic resonance angiography, head; with contrast material(s)	specialty hospitals	3	0		
Outpatient	70546	Magnetic resonance angiography, head; without and with contrast material(s)	diagnostic radiology	7	2	Medical Necessity	
Outpatient	70546	Magnetic resonance angiography, head; without and with contrast material(s)	family practice	1	0		
Outpatient	70546	Magnetic resonance angiography, head; without and with contrast material(s)	hospital	6	1	Medical Necessity	
Outpatient	70546	Magnetic resonance angiography, head; without and with contrast material(s)	specialty hospitals	1	0		
Outpatient	70547	MRA neck; wo contrast material	diagnostic radiology	2	0		
Outpatient	70547	MRA neck; wo contrast material	multiple specialty site	0	1	Medical Necessity	
Outpatient	70549	Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences	diagnostic radiology	3	1	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	70549	Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences	hospital	3	2	Medical Necessity	
Outpatient	70549	Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences	multiple specialty site	0	1	Medical Necessity	
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	ambulatory surgery center	4	0		
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	diagnostic radiology	177	8	Medical Necessity	1
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	emergency medicine	1	0		
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	family practice	1	0		
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	general practice	1	0		
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	hospital	54	11	Medical Necessity	
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	Hospital	7	2	Medical Necessity	
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	multiple specialty site	46	4	Medical Necessity	
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	pediatrics	2	0		
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	radiology nuclear	1	0		
Outpatient	70551	Magnetic resonance imaging, brain); without contrast material	specialty hospitals	26	1	Medical Necessity	
Outpatient	70552	Magnetic resonance imaging, brain with contrast material(s)	diagnostic radiology	1	2	Medical Necessity	
Outpatient	70552	Magnetic resonance imaging, brain with contrast material(s)	hospital	2	0		
Outpatient	70552	Magnetic resonance imaging, brain with contrast material(s)	multiple specialty site	1	1	Medical Necessity	
Outpatient	70552	Magnetic resonance imaging, brain with contrast material(s)	specialty hospitals	1	1	Medical Necessity	
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	ambulatory surgery center	6	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	anesthesiology	2	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	cardiology	1	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	critical care	1	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	diagnostic radiology	288	22	Medical Necessity	
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	emergency medicine	0	1	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	family practice	5	2	Medical Necessity	
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	general practice	2	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	hospital	112	18	Medical Necessity	
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	Hospital	9	4	Medical Necessity	
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	internal medicine	3	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	multiple specialty site	67	9	Medical Necessity	
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	ophthalmology	1	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	orthopaedic surgery	1	0		
Outpatient	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem); without contrast material, followed by contrast materials(s) and further sequences	specialty hospitals	53	2	Medical Necessity	
Outpatient	70554	Magnetic resonance imaging, brain, functional MRI	multiple specialty site	0	1	Medical Necessity	
Outpatient	70555	Magnetic resonance imaging, brain, functional MRI	hospital	1	0		
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	ambulatory surgery center	1	0		
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	cardiology	2	0		
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	critical care	5	3	Medical Necessity	
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	diagnostic radiology	125	22	Medical Necessity	
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	emergency medicine	1	0		
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	family practice	1	0		
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	hospital	35	7	Medical Necessity	1



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Outpatient	71250	Computerized axial tomography, thorax; without contrast material	Hospital	27	1	Medical Necessity	
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	medical oncology	9	1	Medical Necessity	
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	multiple specialty site	38	6	Medical Necessity	
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	otolaryngology	1	0		
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	pediatrics	0	1	Medical Necessity	
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	primary care physician	1	0		
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	rehabilitation medicine	2	1	Medical Necessity	
Outpatient	71250	Computerized axial tomography, thorax; without contrast material	specialty hospitals	25	3	Medical Necessity	
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	cardiology	6	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	diagnostic radiology	106	8	Medical Necessity	
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	emergency medicine	2	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	family practice	1	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	general practice	6	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	hematology oncology	3	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	hospital	85	8	Medical Necessity	
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	Hospital	14	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	internal medicine	2	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	medical oncology	60	4	Medical Necessity	
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	multiple specialty site	37	1	Medical Necessity	
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	oncology	2	0		
Outpatient	71260	Computerized axial tomography, thorax; with contrast material	specialty hospitals	46	5	Medical Necessity	
Outpatient	71270	Computerized axial tomography, thorax; without contrast material, followed by contrast material(s) and further sections	diagnostic radiology	2	9	Medical Necessity	
Outpatient	71270	Computerized axial tomography, thorax; without contrast material, followed by contrast material(s) and further sections	hospital	2	1	Medical Necessity	
Outpatient	71270	Computerized axial tomography, thorax; without contrast material, followed by contrast material(s) and further sections	medical oncology	1	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	cardiology	1	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	diagnostic radiology	68	4	Medical Necessity	
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	emergency medicine	1	0		

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Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	family practice	2	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	general practice	6	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	hospital	23	13	Medical Necessity	
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Hospital	4	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	internal medicine	1	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	multiple specialty site	19	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	ophthalmology	1	0		
Outpatient	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	specialty hospitals	5	1	Medical Necessity	
Outpatient	71275	CTA chest; w/ & wo contrast material	cardiology	1	0		
Outpatient	71275	CTA chest; w/ & wo contrast material	diagnostic radiology	26	4	Medical Necessity	
Outpatient	71275	CTA chest; w/ & wo contrast material	emergency medicine	1	0		
Outpatient	71275	CTA chest; w/ & wo contrast material	family practice	1	0		
Outpatient	71275	CTA chest; w/ & wo contrast material	Hospital	4	1	Medical Necessity	
Outpatient	71275	CTA chest; w/ & wo contrast material	hospital	17	7	Medical Necessity	1
Outpatient	71275	CTA chest; w/ & wo contrast material	multiple specialty site	9	1	Medical Necessity	
Outpatient	71275	CTA chest; w/ & wo contrast material	specialty hospitals	9	1	Medical Necessity	
Outpatient	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for eval)	diagnostic radiology	4	4	Medical Necessity	
Outpatient	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for eval)	hospital	1	0		
Outpatient	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for eval)	multiple specialty site	3	0		
Outpatient	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for eval)	orthopaedic surgery	1	0		
Outpatient	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for eval)	specialty hospitals	1	0		
Outpatient	71551	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of hilar and mediastinal lymphadenopathy); with contrast material(s)	hospital	1	0		
Outpatient	71552	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s) followed by contrast material(s) and further sequences	diagnostic radiology	3	1	Medical Necessity	
Outpatient	71552	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s) followed by contrast material(s) and further sequences	hospital	1	0		

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Outpatient	71552	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s) followed by contrast material(s) and further sequences	multiple specialty site	1	0		
Outpatient	71552	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s) followed by contrast material(s) and further sequences	specialty hospitals	0	1	Medical Necessity	
Outpatient	71555	Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	hospital	2	1	Medical Necessity	
Outpatient	71555	Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	Hospital	1	0		
Outpatient	71555	Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	specialty hospitals	1	0		
Outpatient	72125	Computerized axial tomography, cervical spine; without contrast material	diagnostic radiology	12	3	Medical Necessity	
Outpatient	72125	Computerized axial tomography, cervical spine; without contrast material	family practice	0	1	Medical Necessity	
Outpatient	72125	Computerized axial tomography, cervical spine; without contrast material	hospital	4	0		
Outpatient	72125	Computerized axial tomography, cervical spine; without contrast material	multiple specialty site	5	0		
Outpatient	72125	Computerized axial tomography, cervical spine; without contrast material	specialty hospitals	1	0		
Outpatient	72126	Computerized axial tomography, cervical spine; with contrast material	diagnostic radiology	1	0		
Outpatient	72126	Computerized axial tomography, cervical spine; with contrast material	hospital	1	0		
Outpatient	72126	Computerized axial tomography, cervical spine; with contrast material	multiple specialty site	0	1	Medical Necessity	
Outpatient	72126	Computerized axial tomography, cervical spine; with contrast material	specialty hospitals	1	0		
Outpatient	72127	Computerized axial tomography, cervical spine; without contrast material, followed by contrast material(s) and further sections	multiple specialty site	0	1	Medical Necessity	
Outpatient	72128	Computerized axial tomography, thoracic spine; without contrast material	diagnostic radiology	6	3	Medical Necessity	
Outpatient	72128	Computerized axial tomography, thoracic spine; without contrast material	hospital	0	1	Medical Necessity	
Outpatient	72131	Computerized axial tomography, lumbar spine; without contrast material	diagnostic radiology	22	5	Medical Necessity	
Outpatient	72131	Computerized axial tomography, lumbar spine; without contrast material	hospital	3	3	Medical Necessity	
Outpatient	72131	Computerized axial tomography, lumbar spine; without contrast material	multiple specialty site	6	0		

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Outpatient	72131	Computerized axial tomography, lumbar spine; without contrast material	orthopaedic surgery	0	1	Medical Necessity	
Outpatient	72131	Computerized axial tomography, lumbar spine; without contrast material	specialty hospitals	1	0		
Outpatient	72132	Computerized axial tomography, lumbar spine; with contrast material	diagnostic radiology	0	1	Medical Necessity	
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	ambulatory surgery center	4	0		
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	diagnostic radiology	142	65	Medical Necessity	
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	family practice	1	1	Medical Necessity	
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	general practice	2	0		
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	hospital	30	19	Medical Necessity	
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	Hospital	7	0		
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	multiple specialty site	44	25	Medical Necessity	
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	ophthalmology	1	0		
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	orthopaedic surgery	38	4	Medical Necessity	
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	outpatient clinic	1	1	Medical Necessity	
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	pediatrics	1	0		
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	radiology nuclear	1	0		
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	rehabilitation medicine	2	0		
Outpatient	72141	Magnetic resonance imaging, spinal canal and contents, cervical	specialty hospitals	14	2	Medical Necessity	
Outpatient	72142	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, cervical; with contrast material(s)	diagnostic radiology	1	2	Medical Necessity	
Outpatient	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	diagnostic radiology	43	19	Medical Necessity	
Outpatient	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	family practice	1	0		
Outpatient	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	hospital	10	0		
Outpatient	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	multiple specialty site	6	2	Medical Necessity	
Outpatient	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	orthopaedic surgery	7	1	Medical Necessity	
Outpatient	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	specialty hospitals	1	0		
Outpatient	72147	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, thoracic-; with contrast material(s)	diagnostic radiology	0	1	Medical Necessity	
Outpatient	72147	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, thoracic-; with contrast material(s)	specialty hospitals	2	0		
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	ambulatory surgery center	0	2	Medical Necessity	

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Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	anesthesiology	2	1	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	cardiology	0	1	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	diagnostic radiology	234	108	Medical Necessity	1
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	family practice	4	1	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	general practice	0	2	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	hospital	30	22	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Hospital	11	3	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	internal medicine	0	1	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	multiple specialty site	63	18	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	neurology	1	0		
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	orthopaedic surgery	60	12	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	outpatient clinic	3	2	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	pediatrics	0	1	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	rehabilitation medicine	1	1	Medical Necessity	
Outpatient	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	specialty hospitals	13	4	Medical Necessity	
Outpatient	72149	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, lumbar; with contrast material(s)	diagnostic radiology	0	1	Medical Necessity	
Outpatient	72149	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, lumbar; with contrast material(s)	multiple specialty site	0	1	Medical Necessity	
Outpatient	72149	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, lumbar; with contrast material(s)	orthopaedic surgery	1	0		
Outpatient	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	diagnostic radiology	39	5	Medical Necessity	
Outpatient	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	family practice	2	0		

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overtured on Appeal
Outpatient	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	hospital	15	1	Medical Necessity	
Outpatient	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	multiple specialty site	6	0		
Outpatient	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	pediatrics	3	0		
Outpatient	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	specialty hospitals	8	0		
Outpatient	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	urgent care	1	0		
Outpatient	72157	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	diagnostic radiology	10	0		
Outpatient	72157	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	family practice	1	0		
Outpatient	72157	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	hospital	12	2	Medical Necessity	
Outpatient	72157	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	multiple specialty site	7	0		
Outpatient	72157	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	sleep diagnostic center	1	0		
Outpatient	72157	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	specialty hospitals	2	0		
Outpatient	72158	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	diagnostic radiology	19	9	Medical Necessity	
Outpatient	72158	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	family practice	1	0		
Outpatient	72158	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	hospital	7	4	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overtured on Appeal
Outpatient	72158	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	multiple specialty site	4	4	Medical Necessity	
Outpatient	72158	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	orthopaedic surgery	2	0		
Outpatient	72158	Magnetic resonance (e.g., proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	specialty hospitals	3	0		
Outpatient	72192	Computerized axial tomography, pelvis; without contrast material	diagnostic radiology	6	3	Medical Necessity	
Outpatient	72192	Computerized axial tomography, pelvis; without contrast material	general practice	1	0		
Outpatient	72192	Computerized axial tomography, pelvis; without contrast material	multiple specialty site	4	3	Medical Necessity	
Outpatient	72192	Computerized axial tomography, pelvis; without contrast material	outpatient clinic	0	1	Medical Necessity	
Outpatient	72193	Computed tomography, pelvis; with contrast material(s)	diagnostic radiology	6	1	Medical Necessity	
Outpatient	72193	Computed tomography, pelvis; with contrast material(s)	hospital	1	0		
Outpatient	72193	Computed tomography, pelvis; with contrast material(s)	multiple specialty site	1	1	Medical Necessity	
Outpatient	72194	Computed tomography, pelvis; without contrast material, followed by contrast material(s) and further sections	Hospital	1	0		
Outpatient	72194	Computed tomography, pelvis; without contrast material, followed by contrast material(s) and further sections	multiple specialty site	0	1	Medical Necessity	
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	ambulatory surgery center	0	1	Medical Necessity	
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	diagnostic radiology	27	7	Medical Necessity	
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	family practice	1	0		
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	hospital	5	1	Medical Necessity	
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	Hospital	1	0		
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	multiple specialty site	7	4	Medical Necessity	
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	orthopaedic surgery	3	0		
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	primary care physician	1	0		
Outpatient	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	specialty hospitals	1	1	Medical Necessity	
Outpatient	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	diagnostic radiology	0	1	Medical Necessity	
Outpatient	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	hospital	0	1	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	multiple specialty site	0	2	Medical Necessity	
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	ambulatory surgery center	1	0		
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	diagnostic radiology	71	7	Medical Necessity	
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	hospital	37	4	Medical Necessity	
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	Hospital	8	0		
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	multiple specialty site	30	2	Medical Necessity	
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	pediatrics	2	0		
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	specialty hospitals	23	1	Medical Necessity	
Outpatient	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	sports medicine	1	0		
Outpatient	72198	Magnetic resonance angiography, pelvis, with or without contrast material(s)	diagnostic radiology	3	0		
Outpatient	73200	Computed tomography, upper extremity; without contrast material	diagnostic radiology	21	2	Medical Necessity	
Outpatient	73200	Computed tomography, upper extremity; without contrast material	hospital	4	3	Medical Necessity	
Outpatient	73200	Computed tomography, upper extremity; without contrast material	multiple specialty site	13	1	Medical Necessity	
Outpatient	73200	Computed tomography, upper extremity; without contrast material	orthopaedic surgery	9	1	Medical Necessity	
Outpatient	73200	Computed tomography, upper extremity; without contrast material	rehabilitation medicine	1	0		
Outpatient	73200	Computed tomography, upper extremity; without contrast material	specialty hospitals	1	0		
Outpatient	73201	Computed tomography, upper extremity; with contrast material(s)	diagnostic radiology	1	0		
Outpatient	73201	Computed tomography, upper extremity; with contrast material(s)	multiple specialty site	1	0		



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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	73201	Computed tomography, upper extremity; with contrast material(s)	orthopaedic surgery	1	0		
Outpatient	73206	Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	diagnostic radiology	0	1	Medical Necessity	
Outpatient	73218	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	diagnostic radiology	20	8	Medical Necessity	
Outpatient	73218	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	multiple specialty site	15	2	Medical Necessity	
Outpatient	73218	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	orthopaedic surgery	18	0		
Outpatient	73218	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	outpatient clinic	1	0		
Outpatient	73218	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	specialty hospitals	3	0		
Outpatient	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	diagnostic radiology	5	0		
Outpatient	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	hospital	1	0		
Outpatient	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	orthopaedic surgery	1	0		
Outpatient	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	pediatrics	1	0		
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	ambulatory surgery center	1	0		
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	diagnostic radiology	195	82	Medical Necessity	1
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	family practice	0	1	Medical Necessity	
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	general practice	0	2	Medical Necessity	
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	hospital	25	9	Medical Necessity	
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Hospital	5	7	Medical Necessity	
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	multiple specialty site	83	16	Medical Necessity	
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	orthopaedic surgery	127	12	Medical Necessity	

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Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	outpatient clinic	8	0		
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	radiology nuclear	1	0		
Outpatient	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	specialty hospitals	7	1	Medical Necessity	
Outpatient	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	diagnostic radiology	40	5	Medical Necessity	
Outpatient	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	family practice	0	1	Medical Necessity	
Outpatient	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	Hospital	1	0		
Outpatient	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	hospital	3	0		
Outpatient	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	multiple specialty site	3	1	Medical Necessity	
Outpatient	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	orthopaedic surgery	8	1	Medical Necessity	
Outpatient	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	primary care physician	1	0		
Outpatient	73223	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s), followed by contrast material(s) and further sequences	diagnostic radiology	3	3	Medical Necessity	
Outpatient	73223	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s), followed by contrast material(s) and further sequences	emergency medicine	1	0		
Outpatient	73223	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s), followed by contrast material(s) and further sequences	hospital	1	1	Medical Necessity	
Outpatient	73223	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s), followed by contrast material(s) and further sequences	multiple specialty site	1	1	Medical Necessity	
Outpatient	73700	Computed tomography, lower extremity; without contrast material	cardiology	1	0		
Outpatient	73700	Computed tomography, lower extremity; without contrast material	diagnostic radiology	37	6	Medical Necessity	
Outpatient	73700	Computed tomography, lower extremity; without contrast material	Hospital	4	0		
Outpatient	73700	Computed tomography, lower extremity; without contrast material	hospital	22	4	Medical Necessity	
Outpatient	73700	Computed tomography, lower extremity; without contrast material	multiple specialty site	8	3	Medical Necessity	
Outpatient	73700	Computed tomography, lower extremity; without contrast material	orthopaedic surgery	11	1	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	73700	Computed tomography, lower extremity; without contrast material	outpatient clinic	1	0		
Outpatient	73700	Computed tomography, lower extremity; without contrast material	specialty hospitals	6	2	Medical Necessity	
Outpatient	73701	Computed tomography, lower extremity; with contrast material(s)	diagnostic radiology	1	0		
Outpatient	73701	Computed tomography, lower extremity; with contrast material(s)	multiple specialty site	1	0		
Outpatient	73706	Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	diagnostic radiology	0	1	Medical Necessity	
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	diagnostic radiology	74	17	Medical Necessity	
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	emergency medicine	1	0		
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	family practice	1	1	Medical Necessity	
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	general practice	1	1	Medical Necessity	
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	hospital	10	5	Medical Necessity	1
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	Hospital	1	0		
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	multiple specialty site	19	3	Medical Necessity	
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	orthopaedic surgery	36	1	Medical Necessity	
Outpatient	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	specialty hospitals	2	0		
Outpatient	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	anesthesiology	1	0		
Outpatient	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	diagnostic radiology	14	3	Medical Necessity	
Outpatient	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	general practice	1	0		
Outpatient	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	hospital	3	0		
Outpatient	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	multiple specialty site	3	1	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	orthopaedic surgery	1	0		
Outpatient	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	specialty hospitals	7	1	Medical Necessity	
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	ambulatory surgery center	1	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	anesthesiology	3	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	diagnostic radiology	433	90	Medical Necessity	1
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	emergency medicine	3	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	family practice	4	3	Medical Necessity	
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	general practice	2	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	hospital	53	26	Medical Necessity	
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Hospital	16	1	Medical Necessity	
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	multiple specialty site	132	12	Medical Necessity	1
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	neurosurgery	1	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	ophthalmology	1	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	orthopaedic surgery	290	11	Medical Necessity	
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	outpatient clinic	14	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	pediatrics	3	2	Medical Necessity	
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	radiology nuclear	3	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	rehabilitation medicine	1	0		
Outpatient	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	specialty hospitals	23	0		
Outpatient	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	diagnostic radiology	13	9	Medical Necessity	
Outpatient	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	hospital	4	1	Medical Necessity	

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Outpatient	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	Hospital	1	0		
Outpatient	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	internal medicine	2	0		
Outpatient	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	multiple specialty site	4	2	Medical Necessity	
Outpatient	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	orthopaedic surgery	4	1	Medical Necessity	
Outpatient	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	specialty hospitals	1	0		
Outpatient	73723	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	diagnostic radiology	4	7	Medical Necessity	
Outpatient	73723	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	hospital	1	2	Medical Necessity	
Outpatient	73723	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	Hospital	0	1	Medical Necessity	
Outpatient	73723	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	specialty hospitals	3	0		
Outpatient	73725	Magnetic resonance angiography, lower extremity, with or without contrast material(s)	hospital	2	0		
Outpatient	74150	Computed tomography, abdomen; without contrast material	cardiology	1	0		
Outpatient	74150	Computed tomography, abdomen; without contrast material	diagnostic radiology	2	5	Medical Necessity	
Outpatient	74150	Computed tomography, abdomen; without contrast material	family practice	0	1	Medical Necessity	
Outpatient	74150	Computed tomography, abdomen; without contrast material	hospital	2	1	Medical Necessity	
Outpatient	74150	Computed tomography, abdomen; without contrast material	multiple specialty site	2	0		
Outpatient	74150	Computed tomography, abdomen; without contrast material	pediatrics	0	1	Medical Necessity	
Outpatient	74160	Computed tomography, abdomen; with contrast material(s)	cardiology	1	0		
Outpatient	74160	Computed tomography, abdomen; with contrast material(s)	diagnostic radiology	14	5	Medical Necessity	
Outpatient	74160	Computed tomography, abdomen; with contrast material(s)	family practice	0	1	Medical Necessity	
Outpatient	74160	Computed tomography, abdomen; with contrast material(s)	hospital	8	1	Medical Necessity	
Outpatient	74160	Computed tomography, abdomen; with contrast material(s)	internal medicine	1	0		
Outpatient	74160	Computed tomography, abdomen; with contrast material(s)	multiple specialty site	3	2	Medical Necessity	
Outpatient	74160	Computed tomography, abdomen; with contrast material(s)	specialty hospitals	3	1	Medical Necessity	
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	cardiology	1	0		
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	diagnostic radiology	9	5	Medical Necessity	

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Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	general practice	1	0		
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	hematology oncology	0	2	Medical Necessity	
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	hospital	5	3	Medical Necessity	
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	Hospital	1	0		
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	multiple specialty site	2	0		
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	pediatrics	1	0		
Outpatient	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	specialty hospitals	2	0		
Outpatient	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	diagnostic radiology	12	0		
Outpatient	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	family practice	1	0		
Outpatient	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	hospital	9	0		
Outpatient	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	multiple specialty site	2	0		
Outpatient	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	pediatrics	1	0		
Outpatient	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	specialty hospitals	9	0		
Outpatient	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	diagnostic radiology	2	0		
Outpatient	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Hospital	0	1	Medical Necessity	
Outpatient	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	specialty hospitals	0	1	Medical Necessity	
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	cardiology	2	0		

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	critical care	1	0		
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	diagnostic radiology	74	9	Medical Necessity	
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	emergency medicine	1	0		
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	family practice	0	1	Medical Necessity	
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	Hospital	9	0		
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	hospital	26	6	Medical Necessity	1
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	internal medicine	1	0		
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	multiple specialty site	20	4	Medical Necessity	
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	pediatrics	2	0		
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	primary care physician	1	0		
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	specialty hospitals	11	2	Medical Necessity	
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	urgent care	1	0		
Outpatient	74176	Computed tomography, abdomen and pelvis; without contrast material	urology	2	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	ambulatory surgery center	1	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	cardiology	1	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	critical care	4	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	diagnostic radiology	190	18	Medical Necessity	
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	family practice	11	3	Medical Necessity	
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	general practice	5	1	Medical Necessity	
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	hematology oncology	6	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	hospital	91	15	Medical Necessity	1
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	Hospital	12	2	Medical Necessity	

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Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	medical oncology	22	1	Medical Necessity	
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	multiple specialty site	53	7	Medical Necessity	
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	ob gynecology	1	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	pediatrics	2	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	rehabilitation medicine	2	0		
Outpatient	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	specialty hospitals	28	3	Medical Necessity	
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	anesthesiology	1	0		
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	cardiology	1	0		
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	critical care	3	0		
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	diagnostic radiology	51	11	Medical Necessity	
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	family practice	0	1	Medical Necessity	
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	Hospital	8	0		
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	hospital	16	9	Medical Necessity	
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	medical oncology	2	0		
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	multiple specialty site	17	8	Medical Necessity	
Outpatient	74178	Computed tomography, abdomen and pelvis; without contrast material in one, or both body regions, followed by contrast materials(s) and further sections in one or both body regions	specialty hospitals	3	1	Medical Necessity	
Outpatient	74181	Magnetic resonance (eg, proton) imaging, abdomen	diagnostic radiology	8	1	Medical Necessity	
Outpatient	74181	Magnetic resonance (eg, proton) imaging, abdomen	hospital	3	0		



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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	74181	Magnetic resonance (eg, proton) imaging, abdomen	Hospital	1	0		
Outpatient	74181	Magnetic resonance (eg, proton) imaging, abdomen	specialty hospitals	3	1	Medical Necessity	
Outpatient	74182	Magnetic resonance (eg, proton) imaging, abdomen; with contrast material(s)	diagnostic radiology	2	3	Medical Necessity	
Outpatient	74182	Magnetic resonance (eg, proton) imaging, abdomen; with contrast material(s)	multiple specialty site	0	2	Medical Necessity	
Outpatient	74182	Magnetic resonance (eg, proton) imaging, abdomen; with contrast material(s)	specialty hospitals	1	1	Medical Necessity	
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	critical care	1	0		
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	diagnostic radiology	78	13	Medical Necessity	
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	family practice	3	0		
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	general practice	1	0		
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	Hospital	4	0		
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	hospital	32	3	Medical Necessity	
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	multiple specialty site	32	1	Medical Necessity	
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	radiology nuclear	1	0		
Outpatient	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	specialty hospitals	17	3	Medical Necessity	
Outpatient	74185	Magnetic resonance angiography, abdomen, with or without contrast material(s)	hospital	2	0		
Outpatient	74185	Magnetic resonance angiography, abdomen, with or without contrast material(s)	multiple specialty site	1	0		
Outpatient	74185	Magnetic resonance angiography, abdomen, with or without contrast material(s)	specialty hospitals	1	2	Medical Necessity	
Outpatient	74261	CT colonography diagnostic without contrast (replaces 0067T)	multiple specialty site	1	0		
Outpatient	74263	CT colonography screening (replaces 0066T)	diagnostic radiology	0	1	Medical Necessity	

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Outpatient	74263	CT colonography screening (replaces 0066T)	multiple specialty site	2	1	Medical Necessity	
Outpatient	74420	X-RAY URINARY TRACT EXAM WITH CONTRAST MATERIAL	Urology	1	0		
Outpatient	74712	Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single or first gestation	hospital	3	0		
Outpatient	75557	Cardiac magnetic resonance imaging for morphology and structure without contrast material.	diagnostic radiology	1	0		
Outpatient	75557	Cardiac magnetic resonance imaging for morphology and structure without contrast material.	hospital	2	0		
Outpatient	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences.	diagnostic radiology	4	0		
Outpatient	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences.	general practice	1	0		
Outpatient	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences.	hospital	26	0		
Outpatient	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences.	Hospital	3	0		
Outpatient	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences.	multiple specialty site	4	1	Medical Necessity	
Outpatient	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences.	specialty hospitals	7	0		
Outpatient	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences.	urgent care	1	0		
Outpatient	75563	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences with stress imaging	diagnostic radiology	1	0		
Outpatient	75563	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences with stress imaging	hospital	1	0		
Outpatient	75563	Cardiac magnetic resonance imaging for morphology and function without contrast material followed by with contrast material and further sequences with stress imaging	urgent care	1	0		
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	ambulatory surgery center	0	1	Medical Necessity	
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	diagnostic radiology	2	23	Medical Necessity	

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Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	emergency medicine	1	0		
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	family practice	0	1	Medical Necessity	
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	general practice	0	1	Medical Necessity	
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	hospital	1	7	Medical Necessity	
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	multiple specialty site	4	10	Medical Necessity	
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	pulmonologist	0	1	Medical Necessity	
Outpatient	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	specialty hospitals	0	13	Medical Necessity	
Outpatient	75572	CT, heart with contrast - pulmonary veins (replaces 0145T)	hospital	7	2	Medical Necessity	
Outpatient	75572	CT, heart with contrast - pulmonary veins (replaces 0145T)	specialty hospitals	0	1	Medical Necessity	
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	ambulatory surgery center	2	0		
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	diagnostic radiology	11	1	Medical Necessity	
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	family practice	2	0		
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	hospital	25	1	Medical Necessity	
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	Hospital	4	0		
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	internal medicine	1	0		
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	multiple specialty site	14	6	Medical Necessity	
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	radiation oncology	1	0		
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	specialty hospitals	17	2	Medical Necessity	
Outpatient	75574	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	urgent care	1	0		
Outpatient	75635	CTA, abdominal aorta and bilateral iliofemoral lower extremity runoff, without contrast followed by contrast	diagnostic radiology	2	0		
Outpatient	75635	CTA, abdominal aorta and bilateral iliofemoral lower extremity runoff, without contrast followed by contrast	family practice	2	0		
Outpatient	75635	CTA, abdominal aorta and bilateral iliofemoral lower extremity runoff, without contrast followed by contrast	hospital	2	1	Medical Necessity	

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Outpatient	75635	CTA, abdominal aorta and bilateral iliofemoral lower extremity runoff, without contrast followed by contrast	Hospital	1	0		
Outpatient	75635	CTA, abdominal aorta and bilateral iliofemoral lower extremity runoff, without contrast followed by contrast	multiple specialty site	1	0		
Outpatient	75635	CTA, abdominal aorta and bilateral iliofemoral lower extremity runoff, without contrast followed by contrast	specialty hospitals	0	1	Medical Necessity	
Outpatient	76000	FLUOROSCOPY SPX UP TO 1 HOUR PHYS/QHP TIME	Surgery, Neurological	1	0		
Outpatient	76391	CT, heart, coronary arteries and bypass grafts with contrast - coronary CT angiography (replaces 0146T-0149T)	hospital	1	0		
Outpatient	76942	US GUIDANCE NEEDLE PLACEMENT RS&I	Internal Medicine	1	0		
Outpatient	76942	US GUIDANCE NEEDLE PLACEMENT RS&I	Surgery	1	0		
Outpatient	76948	US GUIDANCE ASPIRATION OVA RS&I	Endocrinology, Reproductive	3	1	Medical Necessity	
Outpatient	76948	US GUIDANCE ASPIRATION OVA RS&I	Obstetrics & Gynecology	2	1	Administrative	
Outpatient	77021	Magnetic resonance imaging guidance for needle placement (eg, for biopsy, needle aspiration, injection, or placement of localization device) radiological supervision and interpretation	specialty hospitals	1	0		
Outpatient	77046	Magnetic resonance imaging, breast, without contrast material; unilateral	diagnostic radiology	0	1	Medical Necessity	
Outpatient	77047	Magnetic resonance imaging, breast, without contrast material; bilateral	hospital	2	3	Medical Necessity	
Outpatient	77047	Magnetic resonance imaging, breast, without contrast material; bilateral	multiple specialty site	1	0		
Outpatient	77047	Magnetic resonance imaging, breast, without contrast material; bilateral	specialty hospitals	0	1	Medical Necessity	
Outpatient	77048	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral	multiple specialty site	0	1	Medical Necessity	
Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	ambulatory surgery center	2	0		
Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	diagnostic radiology	167	14	Medical Necessity	1
Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	family practice	1	0		

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Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	hospital	51	11	Medical Necessity	
Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	Hospital	4	4	Medical Necessity	
Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	internal medicine	1	0		
Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	multiple specialty site	27	5	Medical Necessity	
Outpatient	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	specialty hospitals	19	6	Medical Necessity	
Outpatient	77371	Radiation treatment guided by x-ray	specialty hospitals	2	0		
Outpatient	77372	Radiation treatment delivery, stereotactic radiosurgery (Advanced radiation treatment of a skull lesion)	multiple specialty site	1	0		
Outpatient	77372	Radiation treatment guided by x-ray	hospital	4	0		
Outpatient	77372	Radiation treatment guided by x-ray	specialty hospitals	1	0		
Outpatient	77373	Radiation treatment guided by x-ray	hospital	1	0		
Outpatient	77373	Radiation treatment guided by x-ray	radiation oncology	1	0		
Outpatient	77373	Stereotactic body radiation therapy (radiation treatment) not to exceed 5 fractions	radiation oncology	1	0		
Outpatient	77385	Radiation Therapy Code	hospital	1	0		
Outpatient	77385	Radiation Therapy Code	specialty hospitals	1	1	Medical Necessity	
Outpatient	77385	Radiation treatment guided by x-ray	hospital	1	0		
Outpatient	77385	Radiation treatment guided by x-ray	Hospital	1	0		
Outpatient	77385	Radiation treatment guided by x-ray	radiation oncology	3	0		
Outpatient	77385	Radiation treatment guided by x-ray	specialty hospitals	1	0		
Outpatient	77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	hospital	2	0		
Outpatient	77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	radiation oncology	1	0		
Outpatient	77386	Radiation treatment guided by x-ray	diagnostic radiology	2	0		
Outpatient	77386	Radiation treatment guided by x-ray	hospital	4	1	Medical Necessity	

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Outpatient	77386	Radiation treatment guided by x-ray	Hospital	1	0		
Outpatient	77386	Radiation treatment guided by x-ray	radiation oncology	2	0		
Outpatient	77386	Radiation treatment guided by x-ray	specialty hospitals	4	0		
Outpatient	77387	Guidance for localization of target volume for delivery of radiation treatment (Radiation treatment guidance)	hospital	7	0		
Outpatient	77387	Guidance for localization of target volume for delivery of radiation treatment (Radiation treatment guidance)	Hospital	1	0		
Outpatient	77387	Guidance for localization of target volume for delivery of radiation treatment (Radiation treatment guidance)	radiation oncology	2	1	Medical Necessity	
Outpatient	77387	Guidance for localization of target volume for delivery of radiation treatment (Radiation treatment guidance)	specialty hospitals	4	1	Medical Necessity	
Outpatient	77387	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed	radiation oncology	0	1	Medical Necessity	
Outpatient	77387	Radiation treatment guided by x-ray	diagnostic radiology	2	0		
Outpatient	77387	Radiation treatment guided by x-ray	hospital	9	0		
Outpatient	77387	Radiation treatment guided by x-ray	Hospital	2	0		
Outpatient	77387	Radiation treatment guided by x-ray	radiation oncology	7	0		
Outpatient	77387	Radiation treatment guided by x-ray	specialty hospitals	6	1	Medical Necessity	
Outpatient	77401	Radiation treatment guided by x-ray	Hospital	1	0		
Outpatient	77401	Radiation treatment guided by x-ray	hospital	2	0		
Outpatient	77412	Radiation treatment delivery	hospital	7	0		
Outpatient	77412	Radiation treatment delivery	Hospital	1	0		
Outpatient	77412	Radiation treatment delivery	medical oncology	1	0		
Outpatient	77412	Radiation treatment delivery	radiation oncology	3	0		
Outpatient	77412	Radiation treatment delivery	specialty hospitals	4	0		
Outpatient	77412	Radiation treatment delivery; three or more separate treatment areas; custom blocking, tangential ports wedges, rotational beam, compensators, electron beam; up to 5 MeV	radiation oncology	1	0		
Outpatient	77412	Radiation treatment guided by x-ray	diagnostic radiology	1	0		
Outpatient	77412	Radiation treatment guided by x-ray	hospital	11	0		
Outpatient	77412	Radiation treatment guided by x-ray	medical oncology	1	0		
Outpatient	77412	Radiation treatment guided by x-ray	multiple specialty site	1	0		
Outpatient	77412	Radiation treatment guided by x-ray	radiation oncology	4	0		
Outpatient	77412	Radiation treatment guided by x-ray	specialty hospitals	4	1	Medical Necessity	
Outpatient	77525	Radiation treatment guided by x-ray	hospital	1	0		
Outpatient	77772	Radiation treatment guided by x-ray	radiation oncology	2	0		
Outpatient	77778	Interstitial radioelement application; complex (Radiation treatment delivery)	radiation oncology	1	0		

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	78429	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan.	hospital	1	0		
Outpatient	78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan.	hospital	6	3	Medical Necessity	
Outpatient	78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan.	Hospital	1	0		
Outpatient	78434	Absolute quantitation of myocardial blood flow (AQMBF), positron emission tomography (PET), rest and pharmacologic stress (List separately in addition to code for primary procedure)	hospital	1	0		
Outpatient	78451	Myocardial perfusion imaging, tomographic SPECT - single study (replaces 78464+78478 & 78480)	Hospital	0	1	Medical Necessity	
Outpatient	78451	Myocardial perfusion imaging, tomographic SPECT - single study (replaces 78464+78478 & 78480)	hospital	2	0		
Outpatient	78451	Myocardial perfusion imaging, tomographic SPECT - single study (replaces 78464+78478 & 78480)	specialty hospitals	1	0		
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	ambulatory surgery center	1	0		
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	cardiology	21	4	Medical Necessity	
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	diagnostic radiology	12	5	Medical Necessity	
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	family practice	0	1	Medical Necessity	
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	general practice	1	0		
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	general surgery	4	0		
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	hospital	22	10	Medical Necessity	
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	Hospital	2	0		
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	internal medicine	1	3	Medical Necessity	
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	interventional cardiology	1	0		

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Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	multiple specialty site	21	6	Medical Necessity	1
Outpatient	78452	Myocardial perfusion imaging, tomographic SPECT - multiple studies (replaces 78465 + 78478 & 78480)	specialty hospitals	19	4	Medical Necessity	1
Outpatient	78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study;	hospital	1	0		
Outpatient	78472	Gated heart, resting	hospital	1	0		
Outpatient	78492	Myocardial imaging, positron emission tomography (PET), perfusion study(including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and/or stress (exercise or pharmacologic)	cardiology	2	1	Medical Necessity	
Outpatient	78492	Myocardial imaging, positron emission tomography (PET), perfusion study(including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and/or stress (exercise or pharmacologic)	diagnostic radiology	1	0		
Outpatient	78608	Brain imaging, positron emission tomography (PET); metabolic	hospital	2	2	Medical Necessity	
Outpatient	78608	Brain imaging, positron emission tomography (PET); metabolic	multiple specialty site	1	0		
Outpatient	78608	Brain imaging, positron emission tomography (PET); metabolic	specialty hospitals	1	0		
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	ambulatory surgery center	2	0		
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	diagnostic radiology	26	5	Medical Necessity	
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	hospital	35	3	Medical Necessity	
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	Hospital	3	1	Medical Necessity	
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	internal medicine	1	1	Medical Necessity	
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	medical oncology	30	7	Medical Necessity	
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	multiple specialty site	6	1	Medical Necessity	
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	nuclear medicine	1	0		
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	oncology	1	1	Medical Necessity	
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	radiation oncology	1	0		
Outpatient	78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, skull base to mid-thigh	specialty hospitals	17	0		1
Outpatient	78816	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, whole body	diagnostic radiology	3	0		



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Outpatient	78816	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, whole body	hospital	8	1	Medical Necessity	
Outpatient	78816	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, whole body	medical oncology	6	0		
Outpatient	78816	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, whole body	multiple specialty site	2	0		
Outpatient	78816	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, whole body	orthopaedic surgery	1	0		
Outpatient	78816	Tumor imaging, positron emission tomography (PET) with concurrently acquired CT, whole body	specialty hospitals	5	0		
Outpatient	79005	Nuclear rx oral admin	general surgery	1	0		
Outpatient	79005	Radiation treatment guided by x-ray	diagnostic radiology	1	0		
Outpatient	81228	CYTOG ALYS CHRML ABNR CGH	Independent Lab	1	0		
Outpatient	81415	EXOME SEQUENCE ANALYSIS	Maternal & Fetal Medicine	1	0		
Outpatient	81416	EXOME SEQUENCE ANALYSIS EACH COMPARATOR EXOME	Maternal & Fetal Medicine	1	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Clinical Genetics-M.D.	3	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Hematology/Oncology	2	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Internal Medicine	1	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Medical Genetics	1	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Nurse Practitioner	16	2	Medical Necessity	
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Obstetrics & Gynecology	3	2	Medical Necessity	
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Oncology, Medical	6	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Physician Assistant	1	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Radiology, Diagnostic	1	0		
Outpatient	81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	Surgery	3	1	Medical Necessity	
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Clinical Genetics-M.D.	3	0		
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Hematology/Oncology	2	0		
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Internal Medicine	1	0		
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Medical Genetics	1	0		
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Nurse Practitioner	16	2	Medical Necessity	
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Obstetrics & Gynecology	5	2	Medical Necessity	
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Oncology, Medical	5	0		
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Physician Assistant	1	0		
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Radiology, Diagnostic	1	0		
Outpatient	81433	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	Surgery	3	1	Medical Necessity	
Outpatient	81460	WHOLE MITOCHONDRIAL GENOME	Maternal & Fetal Medicine	0	1	Medical Necessity	
Outpatient	82784	ASSAY OF GAMMAGLOBULIN IGA IGD IGG IGM EACH	Pediatrics	2	1	Administrative	

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Outpatient	82785	ASSAY OF GAMMAGLOBULIN IGA IGD IGG IGM EACH	Pediatrics	2	1	Administrative	
Outpatient	82787	GAMMAGLOBULIN IMMUNOGLOBULIN SUBCLASSES	Pediatrics	2	1	Administrative	
Outpatient	83520	IMMUNOASSAY ANALYTE QUANTITATIVE NOS	Pediatrics	2	1	Administrative	
Outpatient	85025	GAMMAGLOBULIN IMMUNOGLOBULIN SUBCLASSES	Pediatrics	2	1	Administrative	
Outpatient	86001	ALLERGEN SPECIFIC IGG QUAN/SEMIQUAN EA ALLERGEN	Pediatrics	0	3	Medical Necessity	
Outpatient	86003	ALLERGEN SPECIFIC IGE QUAN/SEMIQUAN EA ALLERGEN	Pediatrics	2	1	Administrative	
Outpatient	86008	ALLERGEN SPEC IGE RECOMBINANT/PURIFIED COMPNT EA	Pediatrics	2	1	Administrative	
Inpatient	87635	SARS-COV-2 COVID-19 AMP PRB	Family Practice	1	0		
Outpatient	88184	FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY 1ST	Pediatrics	2	1	Administrative	
Outpatient	88185	FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY 1ST	Pediatrics	2	1	Administrative	
Outpatient	89250	CUL OOCYTE/EMBRYO <4 DAYS	Endocrinology, Reproductive	3	2	Medical Necessity	
Outpatient	89250	CUL OOCYTE/EMBRYO <4 DAYS	Obstetrics & Gynecology	1	1	Administrative	
Outpatient	89253	ASSTD EMBRYO HATCHING MICROTQS ANY METH	Endocrinology, Reproductive	6	7	Administrative	
Outpatient	89253	ASSTD EMBRYO HATCHING MICROTQS ANY METH	Obstetrics & Gynecology	4	3	Medical Necessity	
Outpatient	89254	OOCYTE ID FROM FOLLICULAR FLU	Endocrinology, Reproductive	3	2	Medical Necessity	
Outpatient	89254	OOCYTE ID FROM FOLLICULAR FLU	Obstetrics & Gynecology	2	1	Administrative	
Outpatient	89255	PREPJ EMBRYO TR	Endocrinology, Reproductive	5	1	Medical Necessity	
Outpatient	89258	CRYOPRSRV EMBRYO	Endocrinology, Reproductive	5	9	Administrative	
Outpatient	89258	CRYOPRSRV EMBRYO	Obstetrics & Gynecology	0	9	Administrative	
Outpatient	89268	INSEMINATION OOCYTES	Endocrinology, Reproductive	2	0		
Outpatient	89268	INSEMINATION OOCYTES	Obstetrics & Gynecology	2	1	Administrative	
Outpatient	89272	EXTND CUL OOCYTE/EMBRYO 4-7 DAYS	Endocrinology, Reproductive	3	2	Medical Necessity	
Outpatient	89272	EXTND CUL OOCYTE/EMBRYO 4-7 DAYS	Obstetrics & Gynecology	2	1	Administrative	
Outpatient	89280	ASSTD FERTILIZATION MICROTQ </EQUAL 10 OOCYTES	Endocrinology, Reproductive	4	6	Medical Necessity	
Outpatient	89280	ASSTD FERTILIZATION MICROTQ </EQUAL 10 OOCYTES	Obstetrics & Gynecology	1	2	Medical Necessity	
Outpatient	89281	ASSTD FERTILIZATION MICROTQ > 10 OOCYTES	Endocrinology, Reproductive	4	6	Medical Necessity	
Outpatient	89281	ASSTD FERTILIZATION MICROTQ > 10 OOCYTES	Obstetrics & Gynecology	1	2	Medical Necessity	
Outpatient	89290	BX OOCYTE MICROTQ >/EQUAL 5 EMBRY	Endocrinology, Reproductive	0	17	Medical Necessity	
Outpatient	89290	BX OOCYTE MICROTQ >/EQUAL 5 EMBRY	Obstetrics & Gynecology	0	8	Medical Necessity	
Outpatient	89291	BX OOCYTE MICROTQ >5 EMBRY	Endocrinology, Reproductive	0	17	Medical Necessity	
Outpatient	89291	BX OOCYTE MICROTQ >5 EMBRY	Obstetrics & Gynecology	0	9	Medical Necessity	
Outpatient	89337	CRYOPRESERVATION MATURE OOCYTE(S)	Endocrinology, Reproductive	0	2	Medical Necessity	
Outpatient	89337	CRYOPRESERVATION MATURE OOCYTE(S)	Obstetrics & Gynecology	0	2	Medical Necessity	
Outpatient	89342	STORAGE PER YEAR EMBRYO	Endocrinology, Reproductive	5	4	Administrative	
Outpatient	89342	STORAGE PER YEAR EMBRYO	Obstetrics & Gynecology	0	7	Administrative	

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Outpatient	89346	STORAGE PER YEAR OOCYTE	Endocrinology, Reproductive	0	2	Medical Necessity	
Outpatient	89346	STORAGE PER YEAR OOCYTE	Obstetrics & Gynecology	0	2	Medical Necessity	
Outpatient	89352	THAWING CRYOPRESERVED EMBRYO	Endocrinology, Reproductive	4	0		
Outpatient	89353	THAWING CRYOPRESERVED SPERM/SEMEN EACH ALIQUOT	Endocrinology, Reproductive	1	2	Administrative	
Outpatient	89353	THAWING CRYOPRESERVED SPERM/SEMEN EACH ALIQUOT	Obstetrics & Gynecology	0	1	Administrative	
Outpatient	89356	THAWING CRYOPRESERVED OOCYTES EACH ALIQUOT	Endocrinology, Reproductive	1	0		
Outpatient	90378	Synagis	Office	2	0		
Outpatient	90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	Clinical Psychologist	3	0		
Outpatient	90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	Clinical Social Worker	1	0		
Outpatient	90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	Unknown	1	0		
Outpatient	90832	PSYCHOTHERAPY PATIENT &/ FAMILY 30 MINUTES	Unknown	1	0		
Outpatient	90833	PSYCHOTHERAPY PT&/FAMILY W/E&M SRVCS 30 MIN	Psychiatric Nurse	1	0		
Outpatient	90834	PSYCHOTHERAPY PATIENT &/ FAMILY 45 MINUTES	Clinical Social Worker	2	0		
Outpatient	90834	PSYCHOTHERAPY PATIENT &/ FAMILY 45 MINUTES	Unknown	1	0		
Outpatient	90836	PSYCHOTHERAPY PT&/FAMILY W/E&M SRVCS 45 MIN	Psychiatric Nurse	0	0		
Outpatient	90837	PSYCHOTHERAPY PATIENT &/ FAMILY 60 MINUTES	Clinical Social Worker	2	0		
Outpatient	90837	PSYCHOTHERAPY PATIENT &/ FAMILY 60 MINUTES	Licensed Professional Counselor	3	0		
Outpatient	90837	PSYCHOTHERAPY PATIENT &/ FAMILY 60 MINUTES	Marriage/Family Therapist	1	0		
Outpatient	90837	PSYCHOTHERAPY PATIENT &/ FAMILY 60 MINUTES	Unknown	1	0		
Outpatient	90846	FAMILY PSYCHOTHERAPY W/O PATIENT PRESENT	Clinical Social Worker	2	0		
Outpatient	90846	FAMILY PSYCHOTHERAPY W/O PATIENT PRESENT	Unknown	1	0		
Outpatient	90847	FAMILY PSYCHOTHERAPY W/PATIENT PRESENT	Clinical Social Worker	2	0		
Outpatient	90847	FAMILY PSYCHOTHERAPY W/PATIENT PRESENT	Licensed Professional Counselor	1	0		
Outpatient	90847	FAMILY PSYCHOTHERAPY W/PATIENT PRESENT	Unknown	1	0		
Outpatient	90867	REPET TMS TX INITIAL W/MAP/MOTR THRESHLD/DEL&M	Psychiatry	10	4	Medical Necessity	
Outpatient	90867	REPET TMS TX INITIAL W/MAP/MOTR THRESHLD/DEL&M	Unknown	0	7	Medical Necessity	
Outpatient	90868	THERAP REPETITIVE TMS TX SUBSEQ DELIVERY & MNG	Psychiatry	10	4	Medical Necessity	
Outpatient	90868	THERAP REPETITIVE TMS TX SUBSEQ DELIVERY & MNG	Unknown	0	7	Medical Necessity	
Outpatient	90869	REPET TMS TX SUBSEQ MOTR THRESHLD W/DELIV & MN	Psychiatry	11	4	Medical Necessity	
Outpatient	90869	REPET TMS TX SUBSEQ MOTR THRESHLD W/DELIV & MN	Unknown	0	7	Medical Necessity	
Outpatient	90899	UNLISTED PSYCHIATRIC SERVICE/PROCEDURE	Licensed Professional Counselor	2	0		
Outpatient	91035	GASTROESOPHAG REFLX TEST W/TELEMTRY PH ELTRD	Gastroenterology	1	1	Medical Necessity	
Outpatient	92507	TX SPEECH LANG VOICE COMMJ &/AUDITORY PROC IND	Speech Pathologist	2	0		
Outpatient	92508	TX SPEECH LANGUAGE VOICE COMMJ AUDITRY 2/>INDIV	Speech Pathologist	2	0		
Outpatient	93350	Transthoracic echocardiography (stress echo)	anesthesiology	1	0		

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Outpatient	93350	Transthoracic echocardiography (stress echo)	cardiology	3	1	Medical Necessity	
Outpatient	93350	Transthoracic echocardiography (stress echo)	diagnostic radiology	7	0		
Outpatient	93350	Transthoracic echocardiography (stress echo)	hospital	11	0		
Outpatient	93350	Transthoracic echocardiography (stress echo)	multiple specialty site	3	0		
Outpatient	93350	Transthoracic echocardiography (stress echo)	specialty hospitals	5	1	Medical Necessity	
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	anesthesiology	1	0		
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	cardiology	13	1	Medical Necessity	
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	diagnostic radiology	5	2	Medical Necessity	
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	family practice	1	0		
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	general practice	1	1	Medical Necessity	
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	hospital	18	0		
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	internal medicine	2	0		
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	multiple specialty site	4	1	Medical Necessity	
Outpatient	93351	Stress TTE complete. Transthoracic echocardiography (stress echo) with monitoring.	specialty hospitals	3	0		
Outpatient	93351	Stress TTE complete.	vascular surgery	1	0		
Inpatient	93355	ECHO TEE GUID TCAT ICAR/VESSEL STRUCTURAL INTVN	Cardiology	1	0		
Outpatient	93451	Right heart catheterization including measurement(s) of oxygen saturation and cardiac output, when performed	hospital	3	0		
Outpatient	93451	Right heart catheterization including measurement(s) of oxygen saturation and cardiac output, when performed	multiple specialty site	3	1	Medical Necessity	
Outpatient	93451	Right heart catheterization including measurement(s) of oxygen saturation and cardiac output, when performed	specialty hospitals	4	0		
Outpatient	93452	Left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation when performed	specialty hospitals	1	0		
Outpatient	93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	hospital	2	0		
Outpatient	93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	hospital	1	0		

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Outpatient	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ven	diagnostic radiology	1	0		
Outpatient	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ven	hospital	9	1	Medical Necessity	
Outpatient	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ven	internal medicine	2	0		
Outpatient	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ven	multiple specialty site	8	1	Medical Necessity	
Outpatient	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ven	specialty hospitals	5	1	Medical Necessity	
Outpatient	93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ven	hospital	1	0		
Outpatient	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) fo	diagnostic radiology	1	0		
Outpatient	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) fo	hospital	2	0		

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Outpatient	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) fo	multiple specialty site	1	0		
Outpatient	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) fo	specialty hospitals	1	0		
Outpatient	93593	Right heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone; normal native connections	hospital	0	1	Medical Necessity	
Inpatient	93656	COMPRES EP EVAL ABLTJ ATR FIB	Cardiology	1	0		
Inpatient	95720	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, each increment of greater th	Pediatrics	1	0		
Inpatient	95724	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary	Pediatrics	1	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	diagnostic radiology	1	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	hospital	4	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	Hospital	1	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	multiple specialty site	1	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	outpatient clinic	1	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	pediatrics	1	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	sleep diagnostic center	2	0		
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	specialty hospitals	5	1	Medical Necessity	
Outpatient	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	speech pathology	1	0		
Outpatient	95783	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bi-level ventilation, attended by a technologist	hospital	1	0		

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Outpatient	95805	Multiple sleep latency test	diagnostic radiology	0	2	Medical Necessity	
Outpatient	95805	Multiple sleep latency test	hospital	3	0		
Outpatient	95805	Multiple sleep latency test	multiple specialty site	3	2	Medical Necessity	
Outpatient	95805	Multiple sleep latency test	specialty hospitals	3	1	Medical Necessity	
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	allergy immunology	0	2	Medical Necessity	
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	diagnostic radiology	3	1	Medical Necessity	
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	hospital	14	5	Medical Necessity	
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	Hospital	0	2	Medical Necessity	
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	multiple specialty site	14	3	Medical Necessity	1
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	neurology	0	1	Medical Necessity	
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	outpatient clinic	2	0		
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	pediatrics	3	0		
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	pulmonologist	0	1	Medical Necessity	
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	radiation oncology	1	0		
Outpatient	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	sleep diagnostic center	7	4	Medical Necessity	
Outpatient	95810	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	specialty hospitals	22	4	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	ambulatory surgery center	1	0		
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	cardiology	1	2	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	diagnostic radiology	9	1	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	family practice	0	1	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	general practice	0	1	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	Hospital	12	4	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	hospital	15	8	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	internal medicine	7	1	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	multiple specialty site	35	23	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	outpatient clinic	1	0		
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	pediatrics	3	1	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	sleep diagnostic center	17	8	Medical Necessity	
Outpatient	95811	Polysomnogram; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	specialty hospitals	16	6	Medical Necessity	
Inpatient	95940	IONM 1 ON 1 IN OR W/ATTENDANCE EACH 15 MINUTES	Surgery, Neurological	1	0		
Outpatient	96116	NUBHVL STATUS XM PR HR W/PT INTERP&PREP	Clinical Psychologist	1	0		
Outpatient	96130	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP FIRST HOUR	Clinical Psychologist	2	0		



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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	96130	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP FIRST HOUR	Unknown	1	0		
Outpatient	96131	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR	Clinical Psychologist	2	0		
Outpatient	96131	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR	Unknown	1	0		
Outpatient	96132	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP 1ST HOUR	Clinical Psychologist	5	0		
Outpatient	96133	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP EA ADDL HR	Clinical Psychologist	3	0		
Outpatient	96136	PSYL/NRPSYCL TST PHYS/QHP 2+ TST 1ST 30 MIN	Clinical Psychologist	5	0		
Outpatient	96136	PSYL/NRPSYCL TST PHYS/QHP 2+ TST 1ST 30 MIN	Unknown	1	0		
Outpatient	96137	PSYCL/NRPSYCL TST PHYS/QHP 2+ TST EA ADDL 30 MIN	Clinical Psychologist	3	0		
Outpatient	96137	PSYCL/NRPSYCL TST PHYS/QHP 2+ TST EA ADDL 30 MIN	Unknown	1	0		
Outpatient	96409	CHEMOTX ADMN IV PUSH TQ 1/1ST SBST/DRUG	Pediatric Hematology-Oncology	2	0		
Outpatient	96411	CHEMOTX ADMN IV PUSH TQ EA SBST/DRUG	Pediatric Hematology-Oncology	1	0		
Inpatient	96413	CHEMOTX ADMN IV NFS TQ UP 1 HR 1/1ST SBST/DRUG	Pediatric Hematology-Oncology	2	0		
Inpatient	96415	CHEMOTHERAPY ADMN IV INFUSION TQ EA HR	Pediatric Hematology-Oncology	2	0		
Inpatient	96416	CHEMOTX ADMN TQ INIT PROLNG CHEMOTX NFUS PMP	Pediatric Hematology-Oncology	1	0		
Inpatient	96417	CHEMOTX ADMN IV NFS TQ EA SEQL NFS TO 1 HR	Pediatric Hematology-Oncology	1	0		
Outpatient	97110	THERAPEUTIC PX 1/> AREAS EACH 15 MIN EXERCISES	Unknown	0	1	Medical Necessity	
Outpatient	97112	THER PX 1/> AREAS EACH 15 MIN NEUROMUSC REEDUCA	Unknown	0	1	Medical Necessity	
Outpatient	97140	MANUAL THERAPY TQS 1/> REGIONS EACH 15 MINUTES	Unknown	0	1	Medical Necessity	
Outpatient	97151	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	Applied Behavioral Analysis	13	0		
Outpatient	97151	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	Clinical Psychologist	1	0		
Outpatient	97151	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	Unknown	28	0		
Outpatient	97152	BEHAVIOR ID SUPPORT ASSMT BY 1 TECH EA 15 MIN	Applied Behavioral Analysis	5	0		
Outpatient	97152	BEHAVIOR ID SUPPORT ASSMT BY 1 TECH EA 15 MIN	Unknown	1	0		
Outpatient	97153	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 MIN	Applied Behavioral Analysis	25	0		
Outpatient	97153	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 MIN	Unknown	5	0		
Outpatient	97154	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15 MIN	Applied Behavioral Analysis	2	0		
Outpatient	97155	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 MIN	Applied Behavioral Analysis	25	0		
Outpatient	97155	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 MIN	Unknown	5	0		
Outpatient	97156	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	Applied Behavioral Analysis	25	0		
Outpatient	97156	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	Unknown	5	0		
Outpatient	97530	THERAPEUT ACTVITY DIRECT PT CONTACT EACH 15 MIN	Unknown	0	1	Medical Necessity	
Outpatient	97813	ACUPUNCTURE 1/> NDLS W/ELEC STIMJ 1ST 15 MIN	Acupuncturist	0	1	Medical Necessity	
Outpatient	99203	OFFICE O/P NEW LOW 30-44 MIN	Psychiatric Nurse	1	0		
Outpatient	99204	OFFICE O/P NEW MOD 45-59 MIN	Psychiatric Nurse	1	0		
Outpatient	99213	OFFICE O/P EST LOW 20-29 MIN	Psychiatric Nurse	1	0		

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Outpatient	99214	OFFICE O/P EST MOD 30-39 MIN	Psychiatric Nurse	1	0		
Outpatient	99214	OFFICE O/P EST MOD 30-39 MIN	Psychiatry, Child & Adolescent	1	0		
Outpatient	99215	OFFICE O/P EST HI 40-54 MIN	Psychiatry, Child & Adolescent	1	0		
Inpatient	99223	1ST HOSP IP/OBS HIGH 75	Pediatric Hematology-Oncology	1	0		
Outpatient	99417	PROLNG OP E/M EACH 15 MIN	Emergency Medicine	1	0		
Outpatient	99417	PROLNG OP E/M EACH 15 MIN	Gastroenterology	1	0		
Outpatient	99417	PROLNG OP E/M EACH 15 MIN	Hematology/Oncology	1	0		
Outpatient	99417	PROLNG OP E/M EACH 15 MIN	Nephrology	1	0		
Outpatient	99417	PROLNG OP E/M EACH 15 MIN	Transplant Hepatology	1	0		
Outpatient	99499	UNLISTED EVALUATION AND MANAGEMENT SERVICE	Gynecology	0	1	Medical Necessity	
Outpatient	99499	UNLISTED EVALUATION AND MANAGEMENT SERVICE	Physician Assistant (Family Practice)	0	2	Medical Necessity	
Outpatient	0055T	CPTR-ASST MUSCSKEL NAVIGJ ORTHO CT/MRI	Surgery, Orthopedic	0	2	Medical Necessity	
		Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional		10	1		
Outpatient	0502T	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional	hospital	2	0		
Outpatient	0502T	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional	multiple specialty site	1	0		
Outpatient	0503T	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional	diagnostic radiology	1	1		
Outpatient	0503T	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional	hospital			Medical Necessity	
Outpatient	0504T	Noninvasive estimate of coronary fractional flow reserve (FFR)	hospital	2	1		
Outpatient	0504T	Noninvasive estimate of coronary fractional flow reserve (FFR)	Hospital	1	0		
Outpatient	0627T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level	ambulatory surgery center	0	1	Medical Necessity	
Inpatient	CD	Chemical Dependency	Addictionology	1	0		
Inpatient	CD	Chemical Dependency	Family Practice	4	0		
Inpatient	CD	Chemical Dependency	Internal Medicine	5	0		

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Inpatient	CD	Chemical Dependency	Psychiatry	17	1	Administrative	
Inpatient	CD	Chemical Dependency	Unknown	2	1	Administrative	
Inpatient	DETBABY	Detained Baby	Pediatrics	1	0		
Inpatient	DETOX	Detoxification	Addictionology	1	0		
Inpatient	DETOX	Detoxification	Anesthesiology	1	0		
Inpatient	DETOX	Detoxification	Child Psychiatry	1	0		
Inpatient	DETOX	Detoxification	Child Psychiatry	1	0		
Inpatient	DETOX	Detoxification	Family Practice	1	0		
Inpatient	DETOX	Detoxification	Internal Medicine	1	0		
Inpatient	DETOX	Detoxification	Neurology & Psychiatry	1	0		
Inpatient	DETOX	Detoxification	Psychiatry	11	0		
Inpatient	DETOX	Detoxification	Unknown	1	0		
Inpatient	DRG	Room & Board Ward-General Classification	Cardiovascular Disease	1	0		
Inpatient	DRG	Room & Board Ward-General Classification	Critical Care Medicine	0	1	Medical Necessity	
Inpatient	DRG	Room & Board Ward-General Classification	Emergency Medicine	3	0		
Inpatient	DRG	Room & Board Ward-General Classification	Family Practice	3	3	Administrative	
Inpatient	DRG	Room & Board Ward-General Classification	General Practice	1	0		
Inpatient	DRG	Room & Board Ward-General Classification	Internal Medicine	6	2	Administrative	
Inpatient	DRG	Room & Board Ward-General Classification	Midwife	1	0		
Inpatient	DRG	Room & Board Ward-General Classification	Neonatology	1	1	Administrative	
Inpatient	DRG	Room & Board Ward-General Classification	Neurology	2	1	Medical Necessity	
Inpatient	DRG	Room & Board Ward-General Classification	Obstetrics & Gynecology	8	2	Administrative	
Inpatient	DRG	Room & Board Ward-General Classification	Oncology, Gynecologic	2	0		
Inpatient	DRG	Room & Board Ward-General Classification	Pediatrics	3	2	Administrative	1
Inpatient	DRG	Room & Board Ward-General Classification	Pulmonary Disease	1	2	Administrative	
Inpatient	DRG	Room & Board Ward-General Classification	Surgery	3	2	Administrative	
Inpatient	DRG	Room & Board Ward-General Classification	Surgery, Neurological	2	1	Administrative	
Inpatient	DRG	Room & Board Ward-General Classification	Surgery, Thoracic Cardiovascular	1	0		
Outpatient	E0486	ORAL DEVICE/APPLIANCE CUSFAB	General Practice - Dental	0	1	Medical Necessity	
Outpatient	E0935	CONT PAS MOTION EXERCISE DEV	Unknown	1	0		
Outpatient	E1002	PWR SEAT TILT	Rehabilitation Medicine	1	0		
Outpatient	G0105	COLORECTAL SCRNI; HI RISK IND	Gastroenterology	1	0		
Outpatient	G0121	COLON CA SCRNI NOT HI RSK IND	Gastroenterology	5	0		
Outpatient	G0260	Inject for sacroliliac joint	ambulatory surgery center	1	0		
Outpatient	G0260	Radiation treatment guided by x-ray	ambulatory surgery center	1	0		

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Outpatient	G0277	Hbot, full body chamber, 30m	Hyperbaric Medicine	1	0		
Outpatient	G2212	Prolong outpt/office vis	Psychiatry, Child & Adolescent	1	0		
Outpatient	G6002	Radiation treatment guided by x-ray	diagnostic radiology	2	0		
Outpatient	G6002	Radiation treatment guided by x-ray	hospital	17	0		
Outpatient	G6002	Radiation treatment guided by x-ray	Hospital	3	0		
Outpatient	G6002	Radiation treatment guided by x-ray	radiation oncology	9	1	Medical Necessity	
Outpatient	G6002	Radiation treatment guided by x-ray	specialty hospitals	9	2	Medical Necessity	
Outpatient	G6002	STEREOSCOPIC X-RAY GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR THE DELIVERY OF RADIATION THERAPY. MPFS CODE IN PLACE OF 77421 FOR 2015	radiation oncology	0	1	Medical Necessity	
Outpatient	G6002	RADIATION TREATMENT DELIVERY, 3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 20 MEV OR GREATER. MPFS CODE IN PLACE OF 77416 FOR 2015	radiation oncology	1	0		
Outpatient	G6014	Radiation treatment to three or more areas	diagnostic radiology	1	0		
Outpatient	G6014	Radiation treatment to three or more areas	hospital	18	0		
Outpatient	G6014	Radiation treatment to three or more areas	Hospital	1	0		
Outpatient	G6014	Radiation treatment to three or more areas	medical oncology	2	0		
Outpatient	G6014	Radiation treatment to three or more areas	multiple specialty site	1	0		
Outpatient	G6014	Radiation treatment to three or more areas	radiation oncology	5	0		
Outpatient	G6014	Radiation treatment to three or more areas	specialty hospitals	9	1	Medical Necessity	
Outpatient	G6015	Radiation treatment guided by x-ray	diagnostic radiology	2	0		
Outpatient	G6015	Radiation treatment guided by x-ray	hospital	7	1	Medical Necessity	
Outpatient	G6015	Radiation treatment guided by x-ray	Hospital	2	0		
Outpatient	G6015	Radiation treatment guided by x-ray	pediatrics	0	1	Medical Necessity	
Outpatient	G6015	Radiation treatment guided by x-ray	radiation oncology	7	0		
Outpatient	G6015	Radiation treatment guided by x-ray	specialty hospitals	6	1	Medical Necessity	
Outpatient	H0015	ALCOHOL AND/OR DRUG SERVICES	Family Practice	2	1	Medical Necessity	
Outpatient	H0035	MH PARTIAL HOSP TX UNDER 24H	Family Practice	2	0		
Outpatient	H0035	MH PARTIAL HOSP TX UNDER 24H	General Practice	4	0		
Outpatient	H0035	MH PARTIAL HOSP TX UNDER 24H	Psychiatric Nurse	1	0		
Outpatient	H0035	MH PARTIAL HOSP TX UNDER 24H	Psychiatry	15	0		
Outpatient	H0035	MH PARTIAL HOSP TX UNDER 24H	Psychiatry, Child & Adolescent	6	1	Medical Necessity	
Outpatient	H0035	MH PARTIAL HOSP TX UNDER 24H	Unknown	2	0		
Outpatient	H2036	A/D TX PROGRAM, PER DIEM	Emergency Medicine	0	1	administrative	
Outpatient	H2036	A/D TX PROGRAM, PER DIEM	Family Practice	3	0		

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Outpatient	H2036	A/D TX PROGRAM, PER DIEM	Psychiatry	4	0		
Outpatient	H2037	A/D TX PROGRAM, PER DIEM	Psychiatry	4	0		
Outpatient	H2038	A/D TX PROGRAM, PER DIEM	Emergency Medicine	0	1	Administrative	
Inpatient	ICU	Intensive Care Unit	Internal Medicine	2	0		
Inpatient	ICU	Intensive Care Unit	Pediatrics	1	0		
Outpatient	J0178	Eylea	Office	12	1	Medical Necessity	
Outpatient	J0490	Benlysta	Office	1	0		
Outpatient	J0517	Fasenra	Office	1	0		
Outpatient	J0517	Fasenra	Pharmacy	1	0		
Outpatient	J0585	Botox	Office	46	3	Medical Necessity	
Outpatient	J0585	Botox	OutpatientHospital	5	3	Medical Necessity	
Outpatient	J0585	Botox	Pharmacy	3	0		
Outpatient	J0717	Cimzia	Office	1	0		
Outpatient	J0725	CHORIONIC GONADOTROPIN/1000U	Obstetrics & Gynecology	3	1	Administrative	
Outpatient	J0897	Prolia	OutpatientHospital	2	0		
Outpatient	J1437	Monoferric	Office	1	0		
Outpatient	J1439	Injectafer	OutpatientHospital	1	0		
Outpatient	J1561	Gammaked	Home	1	0		
Outpatient	J1561	Gamunex-C	Home	1	0		
Outpatient	J1561	Gamunex-C	OutpatientHospital	1	0		
Outpatient	J1561	Gamunex-C	Pharmacy	1	0		
Outpatient	J1568	Octagam	Office	1	0		
Outpatient	J1569	Gammagard	OutpatientHospital	2	0		
Outpatient	J1726	Makena	Home	1	0		
Outpatient	J1745	Remicade	Home	0	2	Medical Necessity	
Outpatient	J1745	Remicade	Office	4	2	Medical Necessity	
Outpatient	J1930	Somatuline Depot	OutpatientHospital	1	0		
Outpatient	J1932	Lanreotide Acetate	OutpatientHospital	1	0		
Outpatient	J2182	Nucala	Office	2	0		
Outpatient	J2182	Nucala	OutpatientHospital	1	0		
Outpatient	J2323	Tysabri	OutpatientHospital	0	1	Medical Necessity	
Outpatient	J2323	Tysabri	Pharmacy	1	0		
Outpatient	J2327	Skyrizi	Office	1	0		
Outpatient	J2327	Skyrizi	OutpatientHospital	1	0		
Outpatient	J2350	Ocrevus	Home	1	0		

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Outpatient	J2350	Ocrevus	Office	5	0		
Outpatient	J2350	Ocrevus	OutpatientHospital	2	0		
Outpatient	J2357	Xolair	Office	7	0		
Outpatient	J2357	Xolair	Pharmacy	4	0		
Outpatient	J2506	Neulasta	Office	1	0		
Outpatient	J2506	Neulasta	OutpatientHospital	2	0		
Outpatient	J2506	Neulasta Onpro	Office	1	0		
Outpatient	J2777	Vabysmo	Office	1	1	Medical Necessity	
Outpatient	J2778	Lucentis	Office	3	1	Medical Necessity	
Outpatient	J3032	Vyepti	Office	2	0		
Outpatient	J3032	Vyepti	OutpatientHospital	2	0		
Outpatient	J3145	Aveed	Pharmacy	1	0		
Outpatient	J3358	Stelara	Office	1	0		
Outpatient	J3380	Entyvio	Home	4	0		
Outpatient	J3380	Entyvio	Office	5	0		
Outpatient	J3380	Entyvio	OutpatientHospital	1	2	Medical Necessity	1
Outpatient	J7318	Durolane	Office	0	1	Administrative	
Outpatient	J7318	Durolane	Pharmacy	0	2	Medical Necessity	
Outpatient	J7321	Hyalgan	Office	0	1	Medical Necessity	
Outpatient	J7323	Euflexxa	Office	14	2	Medical Necessity	
Outpatient	J7323	Euflexxa	OutpatientHospital	1	0		
Outpatient	J7324	OrthoVisc	Office	11	1	Medical Necessity	
Outpatient	J7324	OrthoVisc	Pharmacy	1	0		
Outpatient	J7325	Synvisc One	Office	1	4	Medical Necessity	
Outpatient	J7325	Synvisc One	Pharmacy	0	1	Medical Necessity	
Outpatient	J7327	Monovisc	Office	13	3	Medical Necessity	
Outpatient	J7327	Monovisc	Pharmacy	3	0		
Outpatient	J7328	Gelsyn-3	Office	0	1	Medical Necessity	
Outpatient	J9022	Tecentriq	Office	1	0		
Outpatient	J9041	Velcade	OutpatientHospital	1	0		
Outpatient	J9144	Darzalex Faspro	OutpatientHospital	1	0		
Outpatient	J9202	Zoladex	Office	3	0		
Outpatient	J9202	Zoladex	OutpatientHospital	2	0		
Outpatient	J9217	Eligard	Office	1	0		
Outpatient	J9217	Lupron Depot (3-Month)	Office	1	0		

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Outpatient	J9217	Lupron Depot (3-Month)	Pharmacy	1	0		
Outpatient	J9228	Yervoy	OutpatientHospital	1	0		
Outpatient	J9271	Keytruda	Office	1	0		
Outpatient	J9271	Keytruda	OutpatientHospital	3	0		
Outpatient	J9273	Tivdak	OutpatientHospital	1	0		
Outpatient	J9299	Opdivo	Office	1	0		
Outpatient	J9299	Opdivo	OutpatientHospital	2	0		
Outpatient	J9306	Perjeta	Office	2	0		
Outpatient	J9306	Perjeta	OutpatientHospital	1	0		
Outpatient	J9308	Cyramza	Office	1	0		
Outpatient	J9312	Rituxan	OutpatientHospital	1	0		
Outpatient	J9317	Trodelvy	OutpatientHospital	1	0		
Outpatient	J9354	Kadcyla	OutpatientHospital	1	0		
Outpatient	J9395	Faslodex	OutpatientHospital	1	0		
Outpatient	K0856	PWC GP3 STD SING POW OPT S/B	Rehabilitation Medicine	0	0		
Outpatient	L8619	COCH IMP EXT PROC/CONTR RPLC	Otolaryngology	0	0		
Inpatient	MAT	Maternity	Obstetrics & Gynecology	6	1	Administrative	
Inpatient	MED	Medical	Acute Short Term Hospital	6	2	Administrative	
Inpatient	MED	Medical	Cardiology	5	0		
Inpatient	MED	Medical	Cardiovascular Disease	5	2	Medical Necessity	
Inpatient	MED	Medical	Emergency Medicine	22	7	Administrative	
Inpatient	MED	Medical	Family Practice	17	9	Administrative	
Inpatient	MED	Medical	Gastroenterology	4	0		
Inpatient	MED	Medical	General Practice	5	0		
Inpatient	MED	Medical	Hematology/Oncology	1	0		
Inpatient	MED	Medical	Internal Medicine	111	37	Administrative	
Inpatient	MED	Medical	Interventional Cardiology	2	0		
Inpatient	MED	Medical	Maternal & Fetal Medicine	2	1	Medical Necessity	
Inpatient	MED	Medical	Midwife	1	1	Administrative	
Inpatient	MED	Medical	Neonatology	1	0		
Inpatient	MED	Medical	Nephrology	1	0		
Inpatient	MED	Medical	Neurology	7	1	Medical Necessity	
Inpatient	MED	Medical	Obstetrics & Gynecology	37	11	Administrative	
Inpatient	MED	Medical	Oncology, Medical	10	1	Administrative	
Inpatient	MED	Medical	Otolaryngology	7	0		

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Inpatient	MED	Medical	Pediatric Cardiology	4	0		
Inpatient	MED	Medical	Pediatric Critical Care	16	0		
Inpatient	MED	Medical	Pediatric Emergency Medicine	1	0		
Inpatient	MED	Medical	Pediatric Hematology-Oncology	22	2	Administrative	
Inpatient	MED	Medical	Pediatric Intensive Care	3	0		
Inpatient	MED	Medical	Pediatric Plastic Surgery	0	1	Administrative	
Inpatient	MED	Medical	Pediatric Surgery	2	1	Medical Necessity	
Inpatient	MED	Medical	Pediatrics	25	11	Administrative	
Inpatient	MED	Medical	Physical Medicine & Rehabilitation	0	1	Medical Necessity	
Inpatient	MED	Medical	Physician Assistant	1	1	Medical Necessity	
Inpatient	MED	Medical	Pulmonary Disease	4	2	Administrative	
Inpatient	MED	Medical	Surgery	38	17	Administrative	
Inpatient	MED	Medical	Surgery Critical care	3	2	Administrative	
Inpatient	MED	Medical	Surgery, Colon & Rectal	4	2	Administrative	
Inpatient	MED	Medical	Surgery, General Vascular	0	1	Administrative	
Inpatient	MED	Medical	Surgery, Neurological	22	1	Administrative	
Inpatient	MED	Medical	Surgery, Oncology	2	2	Administrative	
Inpatient	MED	Medical	Surgery, Orthopedic	6	8	Administrative	
Inpatient	MED	Medical	Surgery, Plastic and Reconstructive	4	0		
Inpatient	MED	Medical	Surgery, Thoracic	6	0		
Inpatient	MED	Medical	Surgery, Thoracic Cardiovascular	9	0		
Inpatient	MED	Medical	Unknown	11	1	Administrative	
Inpatient	MED	Medical	Urology	3	1	Medical Necessity	
Inpatient	MH	Mental Health	Acute Short Term Hospital	1	0		
Inpatient	MH	Mental Health	Addiction Psychiatry	1	0		
Inpatient	MH	Mental Health	Internal Medicine	1	0		
Inpatient	MH	Mental Health	ychiatric Hospital, Acute and Long Te	2	0		
Inpatient	MH	Mental Health	Psychiatry	50	5	Administrative	1
Inpatient	MH	Mental Health	Psychiatry, Child & Adolescent	2	3	Medical Necessity	
Inpatient	MH	Mental Health	Residential Treatment Facility	1	0		
Inpatient	MH	Mental Health	Unknown	1	0		
Inpatient	NEONICU	Neonatal ICU	Acute Short Term Hospital	1	1	Administrative	
Inpatient	NEONICU	Neonatal ICU	Family Practice	1	0		
Inpatient	NEONICU	Neonatal ICU	Neonatal-Perinatal Medicine	2	0		
Inpatient	NEONICU	Neonatal ICU	Neonatology	30	7	Administrative	



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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overturned on Appeal
Inpatient	NEONICU	Neonatal ICU	Obstetrics & Gynecology	8	1	Administrative	
Inpatient	NEONICU	Neonatal ICU	Pediatrics	19	2	Administrative	
Outpatient	Q0138	Feraheme	Office	0	1	Medical Necessity	
Outpatient	Q0138	Feraheme	OutpatientHospital	2	3	Medical Necessity	
Outpatient	Q5101	Zarxio	Office	1	0		
Outpatient	Q5101	Zarxio	OutpatientHospital	3	0		
Outpatient	Q5103	Inflectra	Home	4	0		
Outpatient	Q5103	Inflectra	Office	3	0		
Outpatient	Q5103	Inflectra	OutpatientHospital	1	0		
Outpatient	Q5104	Renflexis	Office	0	1	Medical Necessity	
Outpatient	Q5107	Mvasi	OutpatientHospital	1	0		
Outpatient	Q5108	Fulphila	OutpatientHospital	1	0		
Outpatient	Q5110	Nivestym	Office	1	0		
Outpatient	Q5115	Truxima	Office	4	1	Administrative	
Outpatient	Q5115	Truxima	OutpatientHospital	4	0		
Outpatient	Q5120	Ziextenzo	OutpatientHospital	1	0		
Outpatient	Q5121	Avsola	Office	1	1	Medical Necessity	
Outpatient	Q5126	Alymsys	Office	1	0		
Inpatient	REHAB	Rehabilitation	Gynecology	5	1	Medical Necessity	
Inpatient	REHAB	Rehabilitation	Internal Medicine	3	0		
Inpatient	REHAB	Rehabilitation	Physical Medicine & Rehabilitation	2	0		
Outpatient	S0122	INJ MENOTROPINS 75 IU	Obstetrics & Gynecology	1	1	administrative	
Outpatient	S0126	INJ FOLLITROPIN ALFA 75 IU	Obstetrics & Gynecology	1	1	administrative	
Outpatient	S0128	INJ FOLLITROPIN BETA 75 IU	Obstetrics & Gynecology	1	0		
Outpatient	S0132	INJ GANIRELIX ACETAT 250 MCG	Obstetrics & Gynecology	2	1	administrative	
Inpatient	S2068	BREAST DIEP OR SIEA FLAP	Surgery, Plastic	3	0		
Outpatient	S4011	IVF PACKAGE	Endocrinology, Reproductive	9	4	administrative	
Outpatient	S4011	IVF PACKAGE	Obstetrics & Gynecology	4	1	Medical Necessity	
Outpatient	S4011	IVF PACKAGE	Unknown	0	1	Medical Necessity	
Outpatient	S4015	COMPLETE IVF NOS CASE RATE	Endocrinology, Reproductive	0	1	administrative	
Outpatient	S4015	COMPLETE IVF NOS CASE RATE	Obstetrics & Gynecology	3	1	Medical Necessity	
Outpatient	S4016	FROZEN IVF CASE RATE	Endocrinology, Reproductive	14	5	administrative	
Outpatient	S4016	FROZEN IVF CASE RATE	Obstetrics & Gynecology	4	2	Medical Necessity	
Outpatient	S4021	IVF CANC P ASPIR CASE RATE	Endocrinology, Diabetes & Metabolism	0	1	Medical Necessity	
Outpatient	S4021	IVF CANC P ASPIR CASE RATE	Endocrinology, Reproductive	0	1	Medical Necessity	

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Inpatient/ Outpatient	Procedure Code	Procedure Code Description	Specialty-Servicing Provider	Approved	Denied	Denial Reason	Overtured on Appeal
Outpatient	S4021	IVF CANC P ASPIR CASE RATE	Unknown	0	1	Medical Necessity	
Outpatient	S4022	ASST OOCYTE FERT CASE RATE	Endocrinology, Reproductive	5	5	Medical Necessity	1
Outpatient	S4022	ASST OOCYTE FERT CASE RATE	Obstetrics & Gynecology	5	3	Medical Necessity	
Outpatient	S4022	ASST OOCYTE FERT CASE RATE	Unknown	0	1	Medical Necessity	
Outpatient	S4035	STIMULATED IUI CASE RATE	Endocrinology, Reproductive	2	0		
Outpatient	S4035	STIMULATED IUI CASE RATE	Obstetrics & Gynecology	1	2	Medical Necessity	
Inpatient	SBC	Skilled Nursing Care	Internal Medicine	8	1	Administrative	
Inpatient	SUR	Surgical	Internal Medicine	1	0		
Inpatient	SUR	Surgical	Obstetrics & Gynecology	4	0		
Inpatient	SUR	Surgical	Oncology, Gynecologic	3	0		
Inpatient	SUR	Surgical	Pediatrics	2	0		
Inpatient	SUR	Surgical	Surgery	12	4	Administrative	
Inpatient	SUR	Surgical	Surgery, Colon & Rectal	6	0		
Inpatient	SUR	Surgical	Surgery, General Vascular	0	1	Administrative	
Inpatient	SUR	Surgical	Surgery, Neurological	22	1	Administrative	
Inpatient	SUR	Surgical	Surgery, Oncology	1	0		
Inpatient	SUR	Surgical	Surgery, Orthopedic	22	20	Administrative	
Inpatient	SUR	Surgical	Surgery, Plastic and Reconstructive	7	0		
Inpatient	SUR	Surgical	Surgery, Thoracic	5	0		
Inpatient	SUR	Surgical	Surgery, Thoracic Cardiovascular	6	0		
Inpatient	SUR	Surgical	Urology	5	1	Medical Necessity	