

PROCEDURE CODE	PROCEDURE DESCRIPTION	Approved Count	Denied Count	Modified Count (if applicable)	Total Count	Average Processing (Days)
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)	0	1	0	1	3
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 ventriculography, when performed	1	0	0	1	0
74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1	0	0	1	0
71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	2	0	0	2	0
70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1	0	0	1	0
75574	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)	1	0	0	1	0
74177	Computed tomography, abdomen and pelvis; with contrast material(s)	10	0	1	11	0
74176	Computed tomography, abdomen and pelvis; without contrast material	3	0	0	3	0
74178	Computed tomography, abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions	1	1	0	2	7
75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	0	1	0	1	5
73700	Computed tomography, lower extremity; without contrast material	2	0	0	2	0
72131	Computed tomography, lumbar spine; without contrast material	2	1	0	3	1
70486	Computed tomography, maxillofacial area; without contrast material	6	0	0	6	0
70491	Computed tomography, soft tissue neck; with contrast material(s)	3	0	0	3	0
71260	Computed tomography, thorax, diagnostic; with contrast material(s)	7	0	1	8	1
71250	Computed tomography, thorax, diagnostic; without contrast material	2	0	1	3	16
71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	1	0	0	1	0
64634	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint (List separately in addition to code for primary procedure)	1	0	0	1	0
64633	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	1	0	0	1	0
64636	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint (List separately in addition to code for primary procedure)	1	0	0	1	0
64635	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint	1	0	0	1	0
93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with supervision by a physician or other qualified health care professional	0	1	0	1	3
27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	1	0	0	1	10
64483	Injection(s), anesthetic agent(s) and/or steroid; transforaminal epidural, with imaging guidance (fluoroscopy or CT), lumbar or sacral, single level	3	0	0	3	1
64491	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; second level (List separately in addition to code for primary procedure)	2	0	0	2	0
64490	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level	2	0	0	2	0
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)	3	0	0	3	0
74181	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	1	0	0	1	0
74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	3	0	0	3	1
73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	7	0	0	7	0
73723	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	0	0	1	1	5
73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	2	0	0	2	0
73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	5	2	1	8	4
70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	1	0	0	1	0
70553	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material, followed by contrast material(s) and further sequences	7	0	0	7	0
73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	0	0	1	1	4
70542	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; with contrast material(s)	0	0	1	1	2
70543	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	2	0	0	2	0
72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	3	0	0	3	1
72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	3	3	0	6	3
72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	3	4	0	7	8

72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	1	0	0	1	0
72156	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	3	0	0	3	0
72158	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	2	0	1	3	1
72157	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	4	0	1	5	1
70336	Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)	1	0	0	1	3
70544	Magnetic resonance angiography, head; without contrast material(s)	0	1	0	1	46
70549	Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences	0	1	0	1	46
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	4	1	0	5	5
95805	Multiple sleep latency or maintenance of wakefulness testing, recording, analysis and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness	0	1	0	1	5
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	0	1	0	1	3
78452	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection	3	1	0	4	0
95811	Polysomnography; 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	0	1	0	1	5
78815	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; skull base to mid-thigh	2	1	0	3	1

Reason for Adverse Determination	Appeal Count	Upheld Count	Reversed Count	Total
Medical necessity	1	1	0	
Total				

Healthcare Provider Specialty

Data by healthcare provider specialty is available by request.

Requests shall be sent to:

Aetna Inc.

151 Farmington Avenue

Hartford, CT 06156

The above to be completed by Health Insurers or Utilization Review Entities .

Upon receipt of all required information, insurer will provide the report within 30 calendar days to the requesting entity.

Term/Heading	Explanation
Approved	Prior Auth request was initially or ultimately approved by insurer.
Denied	Prior Auth request was initially or ultimately denied by insurer.
Total Count	Total sum of prior authorization requests by procedure type, provider specialty or adverse determination reason.
Procedure Code Type	Specific type of procedure code being used such as CPT or HCPCS.
Procedure Code	Specific CPT or HCPCS number or code for procedure or service being requested.
Procedure Description	Brief description of requested procedure.
Average Processing Days	Time between initial prior authorization request and the approval or initial adverse determination.
Sent to Appeal	Number of initial prior authorizations requests resulting in an adverse determination, requiring any level of additional appeal/review. This count will also be included in the 'Approved' or 'Denied' column as well depending on the outcome.
Reason for Adverse Determination	Reason for prior authorization requestion denial.
Appeal Count	Number of intial prior authorization requests sent to any level of appeal.
Upheld Count	Number of prior authorization requests sent to appeal that were ultimately upheld or denied.
Reversed Count	Number of prior authorization requests sent to appeal that were ultimately reversed or approved.
Modified Count*	Prior Authorization where there is both an approval and a denial. (Example: Originally requested dosage was denied but an alternative was approved)
	* If your company does not partially approve services, they would not be required to record anything in the modified column. The prior auths will only be documented in approved and denied. If a prior auth is both approved and denied, it should be recorded in the modified column.