AmeriHealth Caritas Next
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Utilization Review Matrix 2027

Evolent has developed the following matrix in an effort to help its clients set up their claim processing systems. Evolent is an independent company that provides utilization management services on behalf of your health plan. This matrix is designed to assist in the resolution of claims adjudication and claims questions related to those services managed by Evolent. The matrix below contains all those CPT-4 codes Evolent manages on behalf of its clients. The codes listed are set up utilizing what would be seen on a professional HCFA 1500 claim. The inclusion of a code(s) also doesn't imply that the service would be approved, only that if we received a request for that service, it would be managed by Evolent.

The "Allowable Billed Groupings" is meant to outline that if a given procedure is authorized, that any of the listed procedures codes could be submitted on a claim representing that service. This assumes that the member is eligible at the time of the service, that appropriate rebundling rules are applied, that the claim includes an appropriate diagnosis code for the CPT code and that the service is performed within the date of service validity period.

Codes that are submitted by facilities using CMS Outpatient PPS logic (C codes) are also not incorporated into this table.

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

***Please note: Services rendered in an Emergency Room, Observation Room, surgery center or hospital inpatient setting are not managed by Evolent.**

Authorized CPT Code	Description	Allowable Billed Groupings
70336	Temporomandibular Joints MRI	70336
70450	Brain CT	70450, 70460, 70470, +0722T, +70472
70471	Brain and Neck CT Angiography	70471, +70472
70480	Orbits CT, Internal Auditory Canal CT, Mastoid CT, Sella CT, Temporal Bone CT	70480, 70481, 70482, +0722T
70486	Sinus (Maxillofacial) CT	70486, 70487, 70488, +0722T
70490	Neck CT	70490, 70491, 70492, +0722T
70496	Brain CT Angiography	70496, +70472
70498	Neck CT Angiography	70498
70540	Face MRI, Internal Auditory Canal MRI, Neck MRI, Orbits MRI, Sinus MRI	70540, 70542, 70543, +0698T
70544	Brain MRA	70544, 70545, 70546
70547	Neck MRA	70547, 70548, 70549
70551	Brain MRI	70551, 70552, 70553, +0698T
70560	Brain and Neck MRA	70560, 70561, 70562

71250	**Chest CT**	**71250, 71260, 71270, +0722T**
71271	**Low Dose CT for Lung Cancer Screening**	**71271, +0722T**
71275	**Chest CT Angiography**	**71275**
71550	**Chest MRI**	**71550, 71551, 71552, +0698T**
71555	**Chest MRA**	**71555**
72125	**Cervical Spine CT**	**72125, 72126, 72127, +0722T**
72128	**Thoracic Spine CT**	**72128, 72129, 72130, +0722T**
72131	**Lumbar Spine CT**	**72131, 72132, 72133, +0722T**
72141	**Cervical Spine MRI**	**72141, 72142, 72156, +0698T**
72146	**Thoracic Spine MRI**	**72146, 72147, 72157, +0698T**
72148	**Lumbar Spine MRI**	**72148, 72149, 72158, +0698T**
72159	**MRA Spinal Canal and Contents**	**72159**
72191	**Pelvis CT Angiography**	**72191**
72192	**Pelvis CT**	**72192, 72193, 72194, +0722T**
72196	**Pelvis MRI**	**72195, 72196, 72197, +0698T**

72198	**Pelvis MRA**	**72198**
73200	**Upper Extremity CT**	**73200, 73201, 73202, +0722T**
73206	**Upper Extremity CT Angiography**	**73206**
73220	**Arm MRI, Hand MRI, Humerus MRI, Upper Extremity Non Joint MRI**	**73218, 73219, 73220, +0698T**
73221	**Carpal Joint MRI, Elbow MRI, Scapula MRI, Shoulder MRI, Upper Extremity Joint MRI, Wrist MRI**	**73221, 73222, 73223, +0698T**
73225	**Arm MRA, Upper Extremity MRA**	**73225**
73700	**Ankle CT, Foot CT, Hip CT, Knee CT, Leg CT, Lower Extremity CT**	**73700, 73701, 73702, +0722T**
73706	**Lower Extremity CT Angiography**	**73706**
73720	**Ankle MRI, Foot MRI, Knee MRI, Lower Extremity MRI**	**73718, 73719, 73720, 73721, 73722, 73723, +0698T**
73721	**Hip MRI**	**72195, 72196, 72197, 73721, 73722, 73723, +0698T**
73725	**Lower Extremity MRA**	**73725**
74150	**Abdomen CT**	**74150, 74160, 74170, +0722T**
74174	**Abdomen and Pelvis CT Angiography**	**74174**
74175	**Abdomen CT Angiography**	**74175**
74176	**Abdomen and Pelvis CT**	**74176, 74177, 74178, +0722T**
74181	**Abdomen MRI (with or without MRCP)**	**74181, 74182, 74183, S8037, +0698T, +0724T**
74185	**Abdomen MRA**	**74185**
75557	**Heart MRI**	**75557, 75559, 75561, 75563, +75565, +0698T**
75572	**Heart CT**	**75572, +0722T**
75573	**Heart CT Congenital Studies**	**75573, +0722T**
75574	**CTA Coronary Arteries (CCTA)**	**75574**
75635	**Abdominal Arteries Aorta CT Angiography with Lower Extremity Runoff**	**75635**
76380	**Follow-up CT (Limited or Localized)**	**76380**
76391	**Magnetic Resonance Elastography (MRE)**	**76391**
76497	**Unlisted CT**	**76497, +0722T**
77046	**Breast MRI**	**77046, 77047, 77048, 77049, +0698T**
77078	**CT Bone Density**	**77078**
77084	**MRI Bone Marrow**	**77084**

78429	**Heart PET Scan with CT for Attenuation**	**78459, 78491, 78492, +78434, 78429, 78430, 78431, 78432, 78433**
78451	**Myocardial Perfusion Imaging**	**78451, 78452, 78453, 78454, 78466, 78468, 78469, 78481, 78483, 78499, +0742T**
78459	**Heart PET Scan**	**78459, 78491, 78492, +78434**
78472	**MUGA Scan**	**78472, 78473, 78494, +78496**
78608	**Brain PET Scan**	**78608, 78609**
78813 [1, 2]	**PET Scan**	**78811, 78812, 78813, 78814, 78815, 78816**
78816 [1, 2]	**PET Scan with CT for Attenuation**	**78811, 78812, 78813, 78814, 78815, 78816**

[1] Evolent will not be making a medical necessity determination as to which of these codes are appropriate. Instead, we will make a determination as to whether the PET scan itself is indicated and then expect the imaging facility to bill in a fashion that accurately describes what was performed.

[2] The 78814 series describes a PET scan where CT technology is used to better "focus" the PET scanning. When an ordering physician requests a PET scan, they won't know whether or not an older machine will be used without the CT component. Evolent's tumor imaging clinical guidelines does not make a distinction between which technique is used. If a PET scan is clinically indicated, use of either series of codes is acceptable. Accordingly, we are expanding the list of "Allowable Billable Groupings" to take this into account. These codes are NOT to be used for a study typically called PET fusion. A PET fusion study is where a PET Scan and a diagnostic CT scan are performed on the same machine simultaneously. Under this situation one is instructed by CPT to bill using both the PET CPT code and the CT scan code describing the body region and procedure performed. The CT code should be appended with a modifier 59 to ensure proper payment. When receiving such requests, Evolent will review the medical necessity for both the PET scan and the CT scan and issue UM determinations on both codes.