



December 19, 2024

Partnership HealthPlan of California Medi-Cal

Important Provider Notice: 487 (Corrected 12/19/24)

**Subject:** CT Scan and MRI TAR Changes - Effective for service dates on and after July 1, 2024 (Corrected 12/19/24)

This is to inform providers and their billing staff that the following treatment authorization request (TAR) changes have been implemented by Partnership Health Plan of California.

**\*For adults age 21 years and older:**

No TARs are required for CT scans of extremities, head, neck, or spine, for CT angiograms, or for screening CT colonograms.

*TARs continue to be required for CT scans of the chest, abdomen, and/or pelvis.*

No TARs are required for other MRI scans of the extremities, head, neck, or spine, for MR elastography, or for breast MRIs –

*TARs continue to be required for MRIs of the chest (including Cardiac MRI 05561), abdomen, and/or pelvis.*

**\*For children age 20 and younger:**

TARs continue to be required for all CT and MRI scans. No changes noted.

**CODES LISTED IN BOLD REQUIRE A TAR FOR ALL MEMBERS**

73206	CT ANGIO UPR EXTRM W/O&W/DYE
73706	CT ANGIO LWR EXTR W/O&W/DYE
<b>75574</b>	<b>CT ANGIO HRT W/3D IMAGE</b>
70496	COMPUTED TOMOGRAPHIC ANGIOGRAPHY HEAD W/ CONTRAST MATERIALS
70498	COMPUTERIZED TOMOGRAPHIC ANGIOGRAPHY, NECK W/ CONTRAST MATERIALS
<b>71275</b>	<b>COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST, W/ CONTRAST MATERIALS</b>
<b>72191</b>	<b>COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS</b>
<b>74174</b>	<b>CT ANG AB&amp;PELV W/O&amp;W/DYE</b>

<b>74175</b>	<b>COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN</b>
<b>75635</b>	<b>COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEM</b>
70450	CT HEAD/BRAIN W/O DYE
70460	CT HEAD/BRAIN W/DYE
70470	CT HEAD/BRAIN W/O & W/DYE
70480	CT ORBIT/EAR/FOSSA W/O DYE
70481	CT ORBIT/EAR/FOSSA W/DYE
70482	CT ORBIT/EAR/FOSSA W/O&W/DYE
70486	CT MAXILLOFACIAL W/O DYE
70487	CT MAXILLOFACIAL W/DYE
70488	CT MAXILLOFACIAL W/O & W/DYE
70496	CT ANGIOGRAM-HEAD
70490	CT SOFT TISSUE NECK W/O DYE
70491	CT SOFT TISSUE NECK W/DYE
70492	CT SFT TSUE NCK W/O & W/DYE
70498	CT ANGIOGRAPHY NECK
70540	MRI ORBIT/FACE/NECK W/O DYE
70542	MRI ORBIT/FACE/NECK W/DYE
70543	MRI ORBIT/FACE/NECK W/O &W/DYE
70551	MRI BRAIN STEM W/O DYE
70552	MRI BRAIN STEM W/DYE
70553	MRI BRAIN STEM W/O & W/DYE
70557	MRI BRAIN W/O DYE
70558	MRI BRAIN W/DYE
70559	MRI BRAIN W/O & W/DYE
<b>71250</b>	<b>CT SCAN OF CHEST</b>
<b>71260</b>	<b>CT SCAN OF CHEST W CONTRAST</b>
<b>71270</b>	<b>CT SCAN OF CHEST DX C-/C+</b>
<b>71275</b>	<b>CT ANGIOGRAPHY CHEST</b>
<b>71550</b>	<b>MRI, CHEST</b>
<b>71551</b>	<b>MRI, CHEST W/CONTRAST MATERIAL(S)</b>
<b>71551</b>	<b>MRI CHEST W/OUT CONTRAST MATERIAL(S) FOLLOWED BY CONTRAST MAT.</b>
72125	CT NECK SPINE W/O DYE
72126	CT NECK SPINE W/DYE
72127	CT NECK SPINE W/O & W/DYE
<b>72128</b>	<b>CT CHEST SPINE W/O DYE</b>
<b>72129</b>	<b>CT CHEST SPINE W/DYE</b>



4665 Business Center Drive  
Fairfield, California 94534

<b>72130</b>	<b>CT CHEST SPINE W/O &amp; W/DYE</b>
72131	CT LUMBAR SPINE W/O DYE
72132	CT LUMBAR SPINE W/DYE
72133	CT LUMBAR SPINE W/O & W/DYE
72141	MRI NECK SPINE W/O DYE
72142	MRI NECK SPINE W/DYE
<b>72146</b>	<b>MRI CHEST SPINE W/O DYE</b>
<b>72147</b>	<b>MRI CHEST SPINE W/DYE</b>
72148	MRI LUMBAR SPINE W/O DYE
72149	MRI LUMBAR SPINE W/DYE
72156	MRI NECK SPINE W/O & W/DYE
<b>72157</b>	<b>MRI CHEST SPINE W/O &amp; W/DYE</b>
72158	MRI LUMBAR SPINE W/O & W/DYE
<b>72192</b>	<b>CT SCAN PELVIS W/O DYE</b>
<b>72193</b>	<b>CT SCAN PELVIS W/DYE</b>
<b>72194</b>	<b>CT SCAN OF PELVIS W &amp; W/O DYE</b>
<b>72191</b>	<b>CT ANGIOGRAPH OF PELVIS W/O &amp; W/DYE</b>
73200	CT UPPER EXTREMITY W/O DYE
73201	CT UPPER EXTREMITY W/DYE
73202	CT UPPR EXTREMITY W/O&W/DYE
73218	MRI UPPER EXTREMITY W/O DYE
73219	MRI UPPER EXTREMITY W/DYE
73220	MRI UPPR EXTREMITY W/O&W/DYE
73221	MRI JOINT UPR EXTREM W/O DYE
73222	MRI JOINT UPR EXTREM W/DYE
73223	MRI JOINT UPR EXTR W/O&W/DYE
73700	CT LOWER EXTREMITY W/O DYE
73701	CT LOWER EXTREMITY W/DYE
73702	CT LWR EXTREMITY W/O&W/DYE
73718	MRI LOWER EXTREMITY W/O DYE
73719	MRI LOWER EXTREMITY W/DYE
73720	MRI LOWER EXTREMITY W/O&W/DYE
73721	MRI JOINT OF LWR EXTRE W/O
73722	MRI JOINT OF LWR EXTR W/DYE
73723	MRI JOINT LWR EXTR W/O&W/
74261	CT COLONOGRAPHY DX
<b>74150</b>	<b>CT SCAN OF ABDOMEN W/O DYE</b>

<b>74160</b>	<b>CT ABDOMEN WITH CONTRAST</b>
<b>74170</b>	<b>CT ABDOMEN W/O CONTRACT FLWD CNT</b>
<b>74175</b>	<b>CTA ABDOMENT W/CONTRAST</b>
<b>75635</b>	<b>CT ANGIOGRAM ABDOMINAL ARTERIES</b>
74262	CT COLONOGRAPHY DX W/DYE
74263	CT COLONOGRAPHY SCREENING
76391	MAGNETIC RESONANCE, ELASTOGRAPHY
77046	MRI WITHOUT CONTRAST, UNILATERAL
77047	MRI WITHOUT CONTRAST BILATERAL
77049	MRI, BREAST WITHOUT/WITH CONTRAST INCL CAD WHEN BILAT
76380	CAT SCAN FOLLOW-UP STUDY
77011	CT SCAN FOR LOCALIZATION
77012	CT SCAN FOR NEEDLE BIOPSY
77013	CT GUIDE FOR TISSUE ABLATION
77014	CT SCAN FOR THERAPY GUIDE
77021	MRI GUIDANCE FOR NEEDLE PLACE
77022	MRI FOR TISSUE ABLATION
77048	MRI, BREAST WITH OR WIITHOUT CONTRAST INCL CAD WHEN UNILATERAL
74261	CT COLONOGRAPHY DX
74262	CT COLONOGRAPHY DX W/DYE
74263	CT COLONOGRAPHY SCREENING

Do not consider this a comprehensive list. Other codes may apply.

**For further information regarding these changes, please contact Partnership's Claims Department at (707) 863-4130.**