



PROVIDER QUICK TIPS

#231

Directions to bypass the prior authorization requirements for CT Scans of the Chest for COVID-19 patients

On March 11, 2020, Governor Wolf issued a press release announcing the Medical Assistance (MA) program will cover COVID-19 testing and treatment for recipients and is lifting some prior authorization requirements to ease access to necessary testing and treatment.

The Office of Medical Assistance Programs recognizes that patients with or being tested for COVID-19 may need a Computed Tomography scan, known as a CT Scan, of the chest. To that end, the MA Fee-for-Service program will not require a prior authorization for a CT scan of the chest when the patient has or is being tested for COVID-19.

A provider who is billing for the CT scan of the chest should add a modifier of **CR** to the procedure codes on the claim when billing the MA Fee-for-Service program (commonly known as ACCESS). The addition of the modifier will allow the claim to bypass the prior authorization requirements.

A **CR** modifier can be added to the following procedure codes for CT scan of the chest when a patient has tested positive for COVID-19 or is suspected to have COVID-19:

- 71250- Computed tomography, thorax; without contrast material
- 71260- Computed tomography, thorax; with contrast material(s)
- 71270- Computed tomography, thorax; without contrast material, followed by contrast material(s) and further sections

For questions regarding the CT Scans please contact 1-800-537-8862, option 2, option 3, option 1.

For questions regarding the claims submission with the CR modifier, please contact 1-800-537-8862, option 2, option 6, option 1.

Thank you for your service to our MA recipients.
We value your participation.
Check the Department's website often at: www.dhs.pa.gov.

